

Constructing Adolescent Identities in the Context of Trauma

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Declaration

I declare that the work contained in this thesis is all my own

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Abstract

Constructing Adolescent Identities in the Context of Trauma

Background: Research indicates that the experience of early interpersonal trauma (in the form of abuse or neglect) affects the development of an early sense of self, negatively influences developmental trajectories and increases the risk of psychosocial problems in adolescence. **Research Aims:** To explore how young people who have experienced trauma construct a sense of self in adolescence, how they manage their identities in the context of their relationships and what resources and strengths they bring to their present view. **Methods:** Data was drawn from in depth interviews with 5 adolescent participants who had experienced abuse and neglect within the family environment. Interpretive Phenomenological Analysis (IPA) was used to analyse participant texts. **Analysis:** Participants were engaged in a process of *Trying to Find Coherence* within their sense of self over time and within current relationships. Other findings are as follows:

- Identities were negotiated in relation to a history of *Ambient Violence* and *Rejection & Loss*. (Themes 1 & 2).
- Some participants experienced positive change in adolescence, in so doing, they drew on the support of others, worked to find answers to difficult questions and selectively drew from aspects of past narratives. Participants rejected externally imposed changes in adolescence. When positive change was experienced, participants wished to use the self generatively. *Growth & Stasis* (Theme 3).
- In *Trying to Make Sense* of their identities (Theme4), participants were subject to contradictory stories of the self which were owned or withheld by others. Participant identities were also negated in order to protect damaged relationships. These processes compromised the integration of the self. Aims towards sense making and coherence were facilitated by therapeutic and supportive relationships.

Key Words: constructing, identity, adolescence, trauma, coherence

SECTION 1 INTRODUCTION

1.1 Introduction to this Study

This study explores how young people who have experienced early interpersonal trauma, in the form of abuse or neglect, construct their identities in adolescence. The participants in this project have unique histories and diverse developmental experiences, but all share the experience of childhood trauma within their care-giving environment. They also share the experience of occupying an adolescent life stage in which issues of self-identity are prefigured (Erikson, 1963; McAdams, 2001).

This research begins from a broadly social constructionist perspective (Burr, 2003). Such a position brings with it an awareness of context and an acceptance of the premise that both personal and research experience are socially, culturally, and discursively mediated. The research aims to explore participant selves, and will do so by studying personal accounts. However, it is acknowledged that contextual limits are placed on the selves we might choose to be, and that this research is inevitably part of that process.

It should be noted that the terms 'self' and 'identity' are used interchangeably within the relevant literature (and also within this present study). However, the term 'identity' often denotes our collated self processes over time. Polkinghorne (1995, p299) defines identity as 'an interpretive scheme' by which the self over time can be understood and made meaningful.

1.1.1 Rationale for the Literature Review

The focus of this literature review developed and evolved in tandem with the study as a whole. This study grew out of a particular context, namely, the clinical work of a specialist team which focussed on issues of complex trauma and primarily based their work around issues of attachment.

This perspective did not limit the choice of literature to be reviewed but did provide a starting point which emphasised 'the self' as something which develops

and evolves in relation to others. A relational emphasis had also been highlighted during early discussions with research participants, and within a pilot study instigated prior to this present study (*see Sections 2.2 & 2.2.1*). This, too, influenced the literature selected for review. Since the present study focussed on the construction of self during adolescence, a portion of the selected literature concentrated on issues of identity during that developmental period and, more generally, on identity as something that evolved over time.

The approach to the literature review employed within this study was guided by qualitative approaches such as ‘Grounded Theory’ (Glaser, 1992), which propose that the choice of literature should fit the concerns of the emerging analysis (Heath, 2006). It is acknowledged that the literature reviewed here may have been influenced by the researcher’s own perspectives and that a different set of researcher beliefs and precepts might have brought a different focus to the literature review. This in turn, may have brought a different kind of analysis (*see Willig, 2003*).

The literature reviewed here includes both empirical and theoretical perspectives. A portion of the literature is also grounded in accumulated clinical practice; this being a kind of knowledge described by Polkinghorne, (1992) as ‘pragmatic’, ‘local’, and ‘situated’. It is the aim of this literature review to explore research, theory and knowledge grounded in clinical practice which has relevance to the topic under consideration and which might usefully inform our thinking about the self in relation to interpersonal trauma.

1.2 Identifying the Problem

1.2.1 Incidence and Prevalence of Maltreatment

In approaching this research topic, it is important to note the scope of the problem of childhood maltreatment. Figures representing the incidence and prevalence of childhood abuse and neglect can be gleaned from the records of public child protection agencies and national epidemiological research. However, available statistics are thought to under-represent the true picture,

mainly because maltreatment is only included in statistics when the child has been officially recorded as in need of protection (The National Child Traumatic Stress Network (NCTSN, 2003). Despite the problem of under-reporting, current figures for the United Kingdom suggest that approximately twenty-one per cent of females and eleven per cent of males have experienced substantiated experiences of childhood sexual abuse (CSA) (Cawson, Wattam & Kelly, 2000; NSPCC, 2004). Meanwhile, in the United States three million children are reported for abuse or neglect each year (Wang, 1997). Recent figures by the U.S. National Child Abuse and Neglect Data System report 903,000 substantiated cases of maltreatment in the year 2001 (NCTSN, 2003).

Van der Kolk, (2003) has stated that there are some gender differences in both the prevalence and nature of the maltreatment, with girls being three times more likely to be sexually abused than boys. However, boys have a twenty-four per cent greater risk of serious physical injury from abuse than girls, and are eighteen per cent more likely to be emotionally neglected. Cases of emotional abuse may be particularly hard to ascertain and quantify since the effects of this abuse may be less visible than cases of overt abuse. (Sheenan, 2006).

1.2.2 Psychological Effects and Sequelae

Research has indicated that the experience of trauma in the form of abuse or neglect is associated with the development of a range of psychosocial problems (see Gleiser, 2003; Van der Kolk, 2003). Moreover, the effects of chronic maltreatment cannot be captured by any particular psychological problem or identifiable disorder. Instead, a range of problems primarily coalesce around impairments in affect and self regulation, self concept and relational competence, and aggression against self and others (Van der Kolk, *ibid.*). Traumatic experiences are known to have both immediate and long term consequences and can negatively influence the developmental trajectories of children as they move through adolescence and into adulthood.

1.2.3 Effects in Adolescence

In adolescence, psychological problems associated with the experience of interpersonal trauma include the development of sexually inappropriate behaviours, positive psychotic symptoms, dissociation and self-harming behaviours (see Ernesto, Forresi, Lievers & Stirk, 2005 for a review). Other problems include juvenile offending and antisocial behaviour (Dixon, Howie, & Starling, 2004). In one follow-up study of young adults who were abused or neglected as children, nearly 80 per cent failed to meet criteria for successful psychosocial functioning (McGloin & Widom, 2000). Similarly, in a study by Silverman, Reinherz, & Giacoma, (1996), 80 per cent of adolescents who had received psychiatric diagnoses had experienced earlier abuse.

As adolescents who have experienced trauma then move into adulthood they are at risk of developing a range of psychosocial problems, many of which have been described as the most 'severe and intractable' of problems (Thomas, 2004, p20). These include suicidality, borderline personality disorder, post traumatic stress disorder, dissociative identity disorder, eating disorders, somatoform disorders, substance abuse, sociopathy and violence, (Johnson, Cohen, Brown, Smail, & Bernstein 1999; Herman, Perry, & Van der Kolk, 1989; Kluft, 1996). In a study by Zanarini, Williams, Lewis, Reich, Vera & Mario (1997) for example, 91 per cent of patients in an inpatient sample diagnosed with 'borderline personality disorder' reported childhood abuse and 92 per cent reported neglect. Some authors also posit a strong (if less acknowledged) relationship between childhood trauma and the development of psychosis (Read, 1997; Read, Morrison & van Os, 2005).

1.2.4 Adolescence as Period of Additional Risk

Adolescence (as a developmental period) involves young people being faced with several developmental challenges. Ornitz, (1996) stresses the importance of the period as a key stage in brain growth and cortical reorganisation, which correspond to shifts in emotional and cognitive function. More fundamentally, this period is associated with issues of identity and the attainment of a greater

sense of individuation from early object ties (Blos, 1967; Erickson & Erickson, 1997). These changes are also reflected in the social demands of this period, which centre on making new commitments to areas such as education, work and relationships. In attending to these challenges, adolescents enter environments associated with greater risk (including exposure to alcohol and drugs). They will also be at increased risk of experiencing violence: indeed, adolescence is a peak period for sexual abuse and assault (Call, Hein, Kipke, McLoyd, Peterson & Reidel, 2002; WHO, 2000).

Although most young people move through adolescence with minimal difficulty (Masten & Garmezy, 1985), rates of depressed mood, suicidal behaviour and other serious disorders show an increase during this period as compared to childhood (WHO, 1998). For many adolescents, increased risks to mental and physical health are compounded by social circumstances such as impoverishment, ethnic or gender discrimination or a move to a new community where they have fewer resources (Crockett, 1997; Gore & Colten, 1991). Eccles (1986) has proposed that a mismatch between the demands of the environment and individual developmental needs is associated with a loss of motivation and an increased risk of mental health problems.

A further perspective on the particular vulnerabilities of adolescence has been proposed by Fonagy, Gergely, Juirst & Target (2004). Fonagy *et al.* (2004) argue that the increased interpersonal stressors and demands of this period are felt particularly keenly by adolescents due to the cognitive attainments of this period (this being the shift to formal operations). With a greater capacity for abstract thought, adolescents can consider a far more complex set of propositions concerning the emotions and motivations of self and others. The task of integrating these, however, can overwhelm some adolescents' capacities. (Fonagy *et al.* *ibid.*) Accordingly, normative developmental tasks (such as individuation) can be derailed, and the strain of integrating more abstract ideas about one's own and others' minds can lead to a weakening in the ability to reflect on (and to differentiate between) one's own interior world and that of

others. Fonagy *et al.* (ibid.) have elaborated on this capacity as ‘reflective function’/ ‘mentalisation’. A fuller description of this theory can be found in a later section of this introduction (*beginning at section 1.8*).

1.3 Defining Trauma

There are various ways of defining traumatic experience, as reflected in the literature to be discussed in this coming section. In approaching the present research, it has been important to find a working definition of trauma that acknowledges these different approaches but at the same time fits the concerns of the present study, namely, an exploration of selfhood in the context of interpersonal trauma. The type of traumatic experience explored within this research has been perpetrated by humans, either intentionally (an act of commission) in the case of abuse, or unintentionally (by omission) in the case of neglect. A good starting point is the definition offered by Van der Kolk, (1987), who has defined psychological trauma as a set of responses to extraordinary, emotionally overwhelming, and personally uncontrollable life events.

Terr (1991) has classified traumatic experience as two distinct types depending on whether it represents single or repeated events. Type 1 trauma consists of short-term unexpected events of limited duration whereas Type 2 consists of sustained, repeated and anticipated events. Of these two types, Type 1 is associated with the development of symptoms that are characteristic of Post Traumatic Stress Disorder (PTSD), while Type 2 is associated with a greater corruption to the person’s identity, and with the development of a wider diversity of problems. Type 2 trauma is associated with the enduring conditions and repetitive events characteristic of childhood abuse and maltreatment.

1.3.1 Complex Trauma

Trauma that is associated with frank examples of abuse or maltreatment in childhood is often termed ‘complex trauma’ (Herman, 1992). This can be defined as children’s exposure to multiple or prolonged traumatic events which occur in the context of the care-giving system, together with the impact of this

experience on the child's subsequent development (NCTSN, 2003). However, other accounts of early trauma would consider a broader range of experiences and would include, for example, the early loss of or separation from an attachment figure (Ogawa, Stroufe, Weinfield, Carlson, & Edgeland, 1997). It should also be noted that the influence of wider social factors is often discounted as a possible constituent of interpersonal trauma (Mullen, Martin, Anderson, & Romans, 1993).

Problems in defining the scope of early traumatic experience are compounded by differences in the use of terminology. Terms such as abuse or maltreatment can encompass diverse experiences: neglect, for example, can be seen as a form of abuse or treated as a distinct problem. Moreover, experiences of abuse and, in particular, child sexual abuse (CSA) are often treated as synonymous with traumatisation (see Finkelhor, 1986); while exposure to physical or sexual violence is less often considered in this context. Indeed, it may be that CSA has attracted particular attention from the research and clinical community, perhaps to the exclusion of other types of maltreatment. Within the trauma literature there is also no clear consensus on where the age range of 'early trauma' might begin or end.

1.3.2 Relational Trauma

Early trauma can be defined by overt life experiences which occur in the context of abusive care giving, as in 'complex trauma'. Alternatively, trauma can be considered as something intrinsically relational, that is, as something produced within the intersubjective patterns of our early attachment relationships (Schorer, 2001). While diverse accounts of traumatisation see issues of attachment as part of a complex picture (see Van der Kolk, 2003), literature working from a psychoanalytic or attachment perspective emphasise troubled, disjunctive or unavailable care-giving as potentially constitutive of trauma in itself.

Schorer (2001) describes 'relational trauma' as something generated in infancy in the context of attachment transactions which 'induce traumatic states of enduring

negative affect' (Schore, 2001, p205). Schore, (2001) sees the core feature of relational trauma as arising from a failure of the caregiver to regulate the infant's affect. The immature cognitive system of an infant is unequipped to self-regulate affect and is dependent on the caregiver to do so in the context of infant/caregiver interactions. Without the support of a regulating (or containing) caregiver, the infant is left in a chronic state of hyperarousal that results in enduring changes at a neuropsychological level (Perry, Pollard, Blakely, Baker, & Vigilante, 1995; Schore, 2001). Moreover, during the period of infancy it is the non-verbal right brain which is at a critical stage of development (Schore, 2001). The right brain is known to be dominant for socio-emotional processing, including the mediation of attachment behaviours (Schore, 2000a; 2000b). The implications of these neuropsychological effects are twofold. Firstly, relational trauma is experienced within the body but cannot be laid down as verbal memories. Secondly, the individual may be predisposed to vulnerabilities in processing and containing affect, and in negotiating interpersonal relationships (van der Kolk & Fisler, 1995).

1.3.3 Trauma as Perceived

If trauma can be conceived of as arising from a range of events and enduring conditions, what then defines an experience as traumatic? Kluft (1984) has proposed that experiences are traumatising to a child when they are perceived as follows: (1) as threatening the child's life; (2) as threatening the life of an important attachment figure; or when (3) the physical intactness and/or clarity of consciousness is breached or impaired; (4) the child is isolated with their fears; and/or (5) the child is systematically misinformed or 'brainwashed' about their situation. What defines an experience as traumatic will also depend on the unique subjective experience of the individual concerned. In keeping with this view, Bos, (1962) stated that trauma depends both on the extent of the danger itself and on each individual's particular vulnerability to it.

Again, in emphasising the subjective experience of trauma, Kalsched (1996) has offered a useful definition of trauma which includes both the idea of something

shocking and overwhelming and also a range of traumatising experiences. Here trauma is described as any experience that causes a child unbearable psychic pain and anxiety and which overwhelms the usual defences. Such experiences would include the experiences of overt abuse, and also the deprivations of an emotionally unavailable carer in infancy (see Winnicott, 1965).

1.3.4 Traumatic Discourses

A further means by which trauma has been defined is through the voices of those who are victim/survivors of abuse. (This perspective has focussed almost exclusively on adult women's experiences of CSA). Here, there is an explicit urge towards empowerment and towards finding a voice in an arena otherwise dominated by professionals and by those who would deny that abuse is both prevalent and damaging. This perspective is epitomised in the subjective accounts found in 'The Courage to Heal' (Bass & Davis, 1994). This approach has, in turn, spurred feminist critique which aims to uncover the ways in which dominant psycho/medical definitions and theories of trauma (often termed 'discourses'), have affected the way trauma is understood and experienced at a cultural and personal level (see Hall & Kondora, 1997; Reavey & Warner, 2003).

One recent critique has considered the effects of a dominant 'trauma paradigm' (Gilfus, 1999). Here it is proposed that descriptions of victimhood render trauma as an individual response which is then 'constructed and diagnosed as psychopathology' (Gilfus, 1999, p 241). Within this frame of reference, the dominant 'trauma paradigm' is seen as offering a constraining and potentially damaging view of persons who have experienced trauma. As a result, there has been an increased call for 'survivor-centred' perspectives and epistemologies which centre on strengths and wisdom (Gilfus, 1999, p1239). Conversely, it has also been argued that there are limits to the benefits of 'giving voice' and identifying oneself as a survivor in a public arena where 'complex and shifting constellations of power', limit what can be said and by whom (Naples, 2003, p1157). Seen from this latter perspective, identifying the self as 'survivor' (or victim) can be seen as a 'monolithic category' or 'totalising discourse' which blurs the particulars and diversity of human experience (Brock, 1990).

1.4 Trauma as Intrapsychic Process

Feminist perspectives bring an awareness of the social construction of trauma. In doing so they alert us to the potentially damaging effects of the shared meanings we bring to trauma. In turning now to an intrapsychic focus, this section begins by considering a very prevalent theme within trauma literature: the view that the traumatised psyche is self-traumatising, and that early interpersonal trauma instantiates enduring expectations and patterns of behaviour which are brought to later relationships.

1.4.1 Traumagenic Factors

In speaking from a CSA perspective, Finkelhor & Browne (1985) take the view that trauma initiates four traumagenic factors. These are 'traumatic sexualisation, stigmatisation, betrayal and powerlessness'. These factors are thought to distort a child's cognitive and emotional orientation to self and to relationships. Accordingly, it is proposed that in 'traumatic sexualisation' sexual preoccupations, compulsive sexuality, or an aversion to sex and intimacy can arise. A sense of 'betrayal' engenders social isolation, guilt, shame and low self-esteem; and a sense of 'powerlessness' results in impaired self-efficacy, poor interpersonal judgement, and hostility towards others. Lastly, a sense of 'stigmatisation' evokes fear and anxiety, a need to be in control and a lack of coping strategies. As such, individuals who have experienced interpersonal trauma may find themselves in life situations where they are exposed to further trauma, but with less personal and interpersonal resources at their disposal.

Several contemporary researchers have utilised Finkelhor & Browne's (1985) model and have suggested that interpersonal patterns arising from traumatisation may endure into adulthood (Davis & Petretic-Jackson, 2000; Testa, Van Zile-Tamsin, & Livingston, 2005). It is proposed, for example, that following early 'traumatic sexualisation' there is a tendency for adult survivors within intimate relationships to feel obligated to provide sex, or to feel that the provision of sex is necessary to gain affection (Davis & Petretic-Jackson, 2000). Similarly a sense

of 'betrayal' developed within early relationships may result in poor judgment about whom to trust, resulting in a series of intense but short-lasting sexual relationships (Briere, 2004).

There is also growing evidence that women with CSA histories are more likely to form relationships with men who are physically and sexually aggressive (Banyard, Arnold, & Smith, 2000; Davis & Petretic-Jackson, 2000). This evidence is typically interpreted as women taking part in high-risk behaviour. However, high-risk sexual behaviours can also be seen as a by-product of survivors' difficulty in establishing or maintaining lasting intimate relationships (Testa, Van Zile-Tamsin, & Livingston, 2005). The implications of traumatisation on relational competence are also suggested in research demonstrating lower levels of sexual and relationship satisfaction, and more marital dissolution, for CSA survivors (DiLillo & Long, 1999; Rumstein-McKean, Hunsley, 2001).

1.4.2 Traumatic Repetition

'Traumatic repetition' is seen to encompass a wide variety of phenomena, including processes of re-enactment and re-victimisation (Gleiser, 2003). In the broadest sense, repetition applies to the re-experiencing of traumatic events on a cognitive, affective and sensorial level in the form of dreams and flashbacks. The repetitive play of traumatised children can be seen as a further example of the re-experiencing/ re-enactment of prior experiences (see Terr, 1991). Re-enactments which echo the prior trauma can also occur within interpersonal contexts. Thus, a victim of childhood sexual abuse might be re-victimised later in rape, or a victim of childhood physical abuse might enter into a series of violent and abusive relationships in adulthood. Repetition (as originally envisaged by Freud, 1920) was seen as an attempt to gain mastery of previously unresolved and repressed experiences. However, recent formulations have seen repetition as a futile exercise which is both 'self-defeating and rigid' (Levy, 2000, pp 48-49).

Another way of understanding repetitive phenomena is to say that part of the self has remained fixed at a level of maturity corresponding to the age at which the original trauma was experienced, and that this part is protected by a set of rigid and maladaptive defences (Kalsched, 1996; Van der Kolk & Fisler, 1995; Watkins and Watkins, 1997). According to Davies and Frawley (1994, pp67-68). the regressed (dissociated) part of the self is the repository for intense and overwhelming 'rage, shame and guilt'. When evoked, the person may react as a child in an abusive situation: they may return to a state of frozen silence in which they are 'overwhelmed by shame, self loathing, and guilt' (Gleiser, 2003, p39).

Kalsched, (1996) has elaborated on how these defences might operate; and has proposed that the more mature part of the self acts as a 'caretaker' to the 'child self'. However, although the care-taker self is protective, it can also be a persecutory force. According to Kalsched, (1996) the regressed child part of the self represents our 'core' or 'true' self which must be protected at all costs. In order to defend the core self, the powerful self screens relations with the outer world, a process which keeps the child self 'shamefully hidden' and isolated from relationships (see Kalsched, 1996, pp1-7). Moreover, the protector (which is both benevolent and persecutory) would rather destroy the entire self than expose the core to further damage from social relationships (Kalsched, 1996).

Kalsched, (1996) also proposes that malevolent/benevolent aspects of the inner 'protector', and its relationship to the inner core, are enacted through unconscious fantasy and dreams. Within dream narratives, various self positions are represented by 'images' (or inner characters/personifications). Kalsched, (1996) formulates these fantasy selves and narratives as something which can not only inhibit the creativity and spontaneity of the self, but, conversely, can also act as a potential route to growth and recovery.

1.4.3 Growth and Recovery

Various perspectives on interpersonal trauma have suggested means by which a more positive and generative sense of self might be found. According to

Kalsched, (1996) an exploration of inner worlds and fantasies may allow repetitive, rigid and persecuting stories to slowly evolve into something more flexible and creative. Alternatively, feminist scholarship has proposed that strength can be found in actions such as the identification of self with cultural products (such as survivor poetry) and through the reformulation of earlier experiences (Gilfus, 1999). One aspect of trauma recovery which has begun to be formally conceptualised and researched is that of 'post-traumatic growth' (i.e. Calhoun & Tedeschi, 1999; Tedeschi & Calhoun 1995).

'Post-traumatic growth' can be defined as the experience of positive life change following trauma. In contrast to the predominant view in theories of resilience, 'traumatic growth' theory proposes that individuals can continue to experience distress, while at the same time experiencing growth. Post-traumatic growth also promotes the view that growth arises from the integration of the trauma experience into the life-narrative of the person concerned (Calhoun & Tedeschi, (1999). The theory also adheres to a set of contradictions: for example, losses also bring gains; an acknowledgement of vulnerability brings strength. Post traumatic growth can manifest in a number of ways. These include a greater compassion for others, an enhanced sense of emotional maturity, and recognition of the struggle that the individual is involved with. Post-traumatic growth is also associated with greater existential or psycho-spiritual clarity.

Post-traumatic growth is a concept predominantly applied to the study of single-event traumas. However, one recent piece of research has looked at survivors of adult sexual assault, 34 per cent of whom had experienced prior sexual victimisation before age 12, within this context; (Frazier, Berman, & Long, 2004). In common with prior research (see Arata, 2000), Frazier found that those with prior experiences of early victimisation showed less effective coping. However, Frazier *et al.*'s research (2004) does not suggest that experiences of earlier trauma necessarily exclude the possibility of post traumatic growth.

1.5 The Developmental Self

Thus far, the introduction to this study has outlined how interpersonal trauma might be manifest within a range of psychosocial problems, and has highlighted adolescence as a period associated with greater risk. The introduction has also discussed various definitions of 'trauma'; and has considered trauma as a self-generating intrapsychic process, and as a platform for further growth. The present subsection of the introduction now discusses 'the self' as a developmental process begun in infancy.

1.5.1 The Interpersonal Self

Developmentalists, together with many working in the psychoanalytic tradition, agree that a subjective sense of self emerges within early caregiving relationships (i.e. Bowlby, 1973; 1980; 1988; Kohut, 1977; Stern, 1985; 1994; Trevarthen, 2001; Winnicott, 1965b). Stern, (1994) for example, talks of the 'emerging moment' within an attuned parent-child relationship which integrates all aspects of lived experience to form a 'schema of a-way-of being-with' or 'proto-narrative'. According to Stern (1985) a core sense of self, together with a core sense of relatedness, begins to emerge by the second month in the context of an infant- and carer -'attuned' relationship.

Stated in attachment terms, processes of attunement can be seen as the building blocks of 'Internal Working Models' (IWM's) (Stern, 1998). IWM's are internalisations of early attachment relationships and carry representations of the self, and of the self in relationship (Bretherton & Mulholland, 1999). An important facet of early attachment relationships is that attuned, emotionally available care-giving will support exploration away from the attachment figure, in the context of trust in the caregiver as a safe base from which to return (Ainsworth, 1963).

As a child develops, these early attachment representations create expectations of self and others (and the self within relationships) that have long-term implications for self-understanding and relational competency (Bowlby, 1980,

1988). When such processes are intact, children build capacities of the self and of others which allow emotions to be understood and regulated. Conversely, parents who show no interest in an infant's thoughts and feelings, or who impose their own into the world of the infant, deny the child information about their own and others' minds. In so doing, a developing child cannot find a sense of their 'own psychological self' in the mind of the other (Howe, 2005, p23).

Research indicates that maltreated children are likely to have experienced highly dysfunctional attachment relationships. Carlson, Cicchetti, Barnett, and Braunwald, (1989) found that 82 per cent of maltreated infants displayed 'disorganised/disorientated' patterns of attachment as compared to 17 per cent within a socio-economically matched control group. Similarly, a meta-analysis by van IJzendoorn, Schuengel & Bakermans-Kranenburg (1999) showed that the base rate of attachment disorganisation in low-risk families tends to be about 15 per cent but can reach 80 per cent in samples with a history of parental maltreatment.

The 'disorganised-disorientated' attachment category was first formulated by Main and Solomon (1990) and emerged from observations of infant behaviours within the 'strange situation' research paradigm. As such, the 'disorganised-disorientated' category (hereafter referred to as 'disorganised') described behaviours that had previously been deemed as unclassifiable (Main, 1995). Typically, 'disorganised' infants fail to demonstrate a coherent proximity-seeking strategy. Instead, they display apprehension, confusion and contradictory approach and avoidance behaviours in relation to their attachment figures. Disorganised infants also show evidence of trances (or freezing). According to Main and Solomon, (1990) these behaviours arise from fear and disorientation produced within the caregiving relationship.

1.5.2 The Represented Self

Amongst recent theories which have elaborated the way the self is developed within early attachment relationships is that of 'reflective function' (RF): Fonagy, Gergely, Jurist & Target, 2004). RF can be described as the attainment of the ability to reflect on one's own and others' mind in terms of mental states; (often termed 'mentalisation'). This 'intentional stance' (Dennett, 1987) is facilitated through secure attachment relationships in which the parents' capacity to observe and recognize the child's mind (and thus infer their interior world) facilitates the child's understanding of self and others at a higher level of complexity. Accordingly, a more primitive, instrumental understanding of the relationship between actions, behaviours and persons can develop into a view which incorporates desires, attributions and beliefs about the self and others. The ability to mentalise involves both self-reflective and interpersonal capacities and has fundamental implications for the way the self develops and is enacted over time in relation to others.

RF emerges within attachment relationships by means of affective 'mirroring', in which the caregiver reflects infant affect states back in a slightly altered form (Fonagy *et al.* 2004, refer to this as 'markedness'). This process allows the infant affect to be 'contained' (and represented) as something manageable. If such mirroring displays occur without markedness, the infant may be overwhelmed by the shared affective state or be left with the impression that its own affect is somehow contagious. This conceptualisation is close to Bion's psychoanalytic theory of containment (Bion, 1959).

It is within these intersubjective exchanges that the infant forms a representation of affect and experience that has moved beyond direct psychic equivalence (in which internal and external states are understood as identical) to a 'second order' or 'symbolic' understanding. In early childhood, (between ages 3 to 5) a 'pretend' mode of functioning (which is seen in play) also emerges. The 'pretend' mode is a way of representing experience in which internal and external worlds are separated (Gopnick, 1993). Neither the 'psychic equivalence' mode or

the 'pretend' mode involve second order representations: in the former, inner and outer realities are seen as identical; in the later they are held as distinct. The development of reflective function involves the integration of psychic equivalence and pretend modes, which, according to Fonagy, Moran and Target (1993), brings the possibility of integration and a sense of continuity to the psychological self.

Reflective function therefore equips the individual with the capacity to distinguish inner and outer reality, pretend from real and intrapsychic processes of the self from interpersonal communication. Fonagy *et al.* (2004) state that when early caregiver relationships are characterised by a lack of affective mirroring, as in the case of abuse and neglect, a fault is created in the construction of the self. Accordingly, the self is compromised as a coherent intrapsychic structure, and also as enacted within interpersonal relationships where the boundaries between self and other affect may be blurred.

Fonagy *et al.* (2004) also hypothesise that without affective mirroring, infants are unable to form secondary representations of their own self states and may be forced to internalise a representation of alien affect (this being the caregivers own mistuned affect). One consequence of parental neglect and abuse is that affective impulses of the self are less open to reflection and thus remain inaccessible. This can result in feelings of emptiness, disorganisation and a deficient ability for impulse control. Moreover, as the self matures, the internalised 'alien' self states may be incorporated into the self structure, creating an illusion of cohesion. These 'alien' parts of the self are then managed by processes of externalisation via bodily symptoms, physical actions, or through the 'projection'. Failures in mentalisation are more likely to occur at times of interpersonal stress. At such times, a non-reflective self might tend towards a 'psychic equivalence' mode of interaction in which the affect states of self and other are assumed to be the same: if a 'pretend' mode is adopted, the self may be left in an unshared and isolated interior world.

1.5.3 The Non-Unitary Self

Various developmental theories have proposed the self as something which is (at least potentially) divided, split or multifaceted. Klein (1953, 1975) for example, saw the human psyche as constituted by internalised 'object relations': these being internal representations of people (mother, father, others), together with representations of the self in relationship with these 'objects'. According to Klein (1975) the self comprises of two positions, the Paranoid-Schizoid and the Depressive. In the former both the ego (the self) and the caregiver (the object) are split into persecutory or idealised representations. In the 'depressive' position a more integrated position is reached which accommodates both persecutory and idealised aspects. Some Object Relations theorists offer a more dynamic view of self-object transactions in which parts of the self interact with each other and with complementary internal and external objects (Fairbairn, 1954).

An important aspect of this model involves the 'splitting' of both self and other (Klein, 1975). Unacceptable aspects of the self can be disavowed and potentially projected elsewhere, and into other objects (as projective identification). Unacceptable aspects of others can also be defended against by the splitting of good and bad aspects: the good aspects are idealised, while bad aspects are repressed (Klein, 1975). Processes of splitting and projective identification are relational phenomena, and the recipient of projection (without being aware of it) may internalise feelings that originate with others (Klein, 1957, 1975).

How these relational processes might be enacted within maltreating caregiver relationships, and the effects this might have on an emerging sense of self, have been discussed by Howe (2005). According to attachment theory, all children, whether maltreated or not, must protect their attachment relationships with the caregiver in order to receive protection (Bowlby, 1969; Howe, 2005). However, in receiving messages of punishment, rejection, or that they exist primarily to meet the needs of another, maltreated children may have little choice than to internalise a sense of themselves as the 'bad object'. In so doing, the child

preserves the carer as good by displacing blame and responsibility onto the self (Howe, 2005). A further maladaptive strategy would be to project these unacceptable aspects of the self into others, a process which serves to elicit further interpersonal attacks and abuse.

According to Howe (2005), both love and hostility may have been internalised. In turn, these segregated attachment representations may be evoked in the context of particular 'attachment' cues within later relationships (Howe, 2005; Steele, 2003). According to Schore (2001), when such models are evoked, individuals show rapid 'inexplicable' shifts in affect, suffer discontinuities in thought, and exhibit sudden changes in speech, facial appearance and mannerisms. According to Liotti (1999, p300), these 'strongly contradictory' and 'incompatible' representations of self and other are likely to hamper the 'mental synthesis of a unitary sense of self'.

1.5.4 Dissociation

Dissociation has been described as a structured separation of mental processes which involves discontinuities in memory, emotions, thoughts, connotations and identity (Spiegel & Cardena, 1991.). Allen (2001) has considered dissociation as comprising two facets: 'detachment', a 'spaced out' or trance-like state; and 'compartmentalisation'. The former involves feelings of de-realisation and a subjective sense of numbing and detachment. In the latter, the self is seen to be comprised of unintegrated, multiple and incoherent representational systems of self and other (Howe, 2005; Steele, 2003).

1.5.5 Dissociation and Disorganised Attachment

Dissociation is strongly associated with the experience of early trauma (Dameburg, 2004; Spiegel & Cardena, 1991). It has also been linked to 'disorganised' attachment patterns in infancy (Carlson, 1998). One longitudinal study by Ogawa, Stroufe, Weinfield, Carlson and England (1997) followed children from birth to age 19. In infancy these individuals had been assessed as to their attachment category. At 19 the presence of dissociative phenomena was

assessed using the Dissociative Experiences Scale (DES). A significant elevation in DES scores was demonstrated in those who had been classified as 'disorganised' and who had also experienced subsequent trauma.

The processes whereby dissociation might arise within dysfunctional attachment relationships, has been suggested by Liotti (1992), and also by Perry, Pollard, Blakely, Barker and Vigilante (1995). In Liotti's view (1992), dissociation arises when an infant's biological need to receive security from its caregivers is met by caregivers who themselves present as a source of fear. In the immature cognitive system of an infant, contradictory behaviours and expectations regarding the attachment relationship give rise to incompatible models of self and other. When in a stressful situation involving the parent, the infant resorts to rapid switching between incompatible representations, and in an overwhelmed conscious state allows contradictory models to determine action simultaneously. A tendency to the segregated models of self and others is reinforced by later overtly abusive behaviour.

In these hyper-aroused and conflicted states, dissociation can be seen as an effective survival response (Perry *et al.*, 1995). However, dissociation in infancy is also associated with a compromised and sensitised neural network (see Schore, (2001). It is also associated with an increased tendency for the continued use of dissociative defences in later stages of the life course (Macfie, Cicchetti & Toth, 2001).

1.5.6. Maltreating Attachments: Implications for the Self over Time

Within this section of the introduction, various perspectives that describe the potential effects of maltreating attachment relationships on the developing self will be discussed. According to Fonagy *et al.* (2004) it is a self that might be impaired with regard to reflective function; thus affecting both self-reflection and relational competence. It is also a self that might be disorganised with regard to attachment strategies (Main, 1995), and which may have internalised multiple, conflicting representations of the self (Steele *et al.* 2003). It may also be a self

which is predisposed to the use of dissociative defensive strategies (Liotti, 1992).

Further implications for how such a self might be structured during later stages of the life course are suggested by research utilising the Adult Attachment Interview (AAI) (George, Kaplan, & Main, 1996). The AAI is the primary method for assessing resolution of childhood trauma and loss in adolescence and adulthood (AAI; George, Kaplan, & Main, 1996) and is scored according to a linguistic analysis of trauma narratives within a structured interview format. The interview has been designed to evoke accounts of attachment-based memories and experiences and respondents are assigned a categorisation of 'unresolved' or 'earned secure' according to their ability to form a coherent account of their trauma experiences (Main & Hesse, 1992a).

Examples of disjunctive linguistic patterns which indicate an 'unresolved' status (with regard to trauma and loss) include confusion regarding the time or place of traumatic experience, intrusion of traumatic memories, and speech which suggests a sudden absorption into another state. (Stovall-McClough, Chase, Cloitre & Marylene, 2006). These states can be understood within a conceptual framework based on segregated representational systems, or alternatively, from within a framework utilising dissociation (Stovall-McClough *et al.*, *ibid.*) According to the latter view, lapses in narrative coherence can be seen as analogous to the state shifts and compartmentalised states of mind seen in dissociation (see Liotti, 1992, 2004).

1. 6 Adolescence, Self and Identity

A sense of self instantiated within early caregiving relationships can be seen as the first stage of many within a life-long process of identity development (Erikson, 1968; Erikson, 1997; Harter, 1999; Kroger, 2004; McAdams, 1993). Within this framework, adolescence is seen to be a key point where the demands for establishing oneself in the world may allow for, or even require, greater change (Grotevant, 1998; Habermas & Bluck, 2000; McAdams, 2001).

1.6.1 Traditional Theories

Adolescence can be seen as a bridge between childhood and adulthood in which there is an attempt to unify past and present selves in relation to future aspirations (see McLean & Thorne, 2003). This process might involve the 'selective repudiation' of childhood identifications; and the finding of new identifications within the 'social processes of the times' (Erikson & Erikson, 1997, p 72). Accordingly, self identity could be defined in relation to one's function in the economy and place within the structure of society, or by 'selectively reconstructing' the past (Erikson, 1958 pp.111 - 112; McAdams, 1993).

Erikson (1968) identified the key 'psychosocial' crisis of adolescence as the urge towards the finding of 'identity'. Failure resulted in an extended state of identity confusion. Newman and Newman (1991) later reformulated Erikson's ideas and proposed various key tasks of adolescence to be mastered in order to achieve the formation of identity. In the 12-18 yrs. age group this process would chiefly centre around the discovery of a sense of self within the group versus alienation. Later adolescence (19-22 yrs.) was proposed as the period when identity formed or resulted in role confusion.

A further influential founding theory is that of secondary 'separation – individuation' Blos, (1967). This theory developed as an extension of Margaret Mahler's earlier espousal of a gradual distancing from a lost 'symbiotic' mother throughout the life cycle (Mahler, Pine & Bergman, 1975). Blos, (1967) saw adolescence as a key period in which this process occurs. Accordingly, adolescence is seen as a transitional period where (optimally) the self must differentiate from early object ties, while continuing to maintain these relationships in a more mature form (Kroger, 2004; Marcia, 1993). In doing so, there is growth towards a more autonomous sense of self that is able to move forward without being controlled or impaired by significant others. A further

aspect of Blos's (1967) theory of adolescence is that it involves the reworking and accommodation of earlier childhood traumatic experience.

It should be noted here that the construct of separation-individuation is not without its critics. These include feminist scholars (e.g. Gilligan, 1982) who have viewed the goal of 'individuation' as derived from a masculinist norm that values autonomy over relationship affiliation. The goal of individuation can also be criticised as holding to (and upholding) a Western ideal of autonomy. Despite these criticisms, the accumulated research indicates that although 'separation-individuation' often occurs later than envisaged by early theorists, it is a normative part of maturation (see Steinberg & Morris, 2001). Also, in Western cultures it predicts good psychosocial adjustment (Holmbeck & Leake, 1999).

1.6.2 Changing Patterns in Adolescent Identities

The making of self-identity is linked to social context, which, at least in Western societies, has been subject to sweeping demographic changes during the last 25 years (see Shulman, 2006). One example of this is that many young people do not assume adult responsibilities (such as having full-time employment) before age 30 (Arnett, 2000; Juang & Silbereisen, 2001; Shulman & Ben Artzi, 2003). Consequently, some of the transitions traditionally associated with adolescence may now extend well into adulthood. Young people may also lead divided lives in which they experience aspects of youth and adult life simultaneously (EGRIS, 2001) or experience themselves as neither adolescents nor adults. One consequence of these developments is that it may no longer be possible to predict linear patterns of development (Arnett, 2000). In keeping with these changes, many contemporary views of adolescence offer a more flexible approach to identity development.

As originally envisaged by Erikson (1959) elements of all stages of identity development could be present in some form throughout life. Taking this one step further, the construct of 'generativity' (usually associated with midlife) has recently been applied to adolescence (Lawford, Pratt, Hunsberger & Pancer,

2005). Generativity is often considered the most complex of identity achievements and has been traditionally associated with parenting roles. However, McAdams and de St Aubin (1992) have reformulated generativity, its key components comprising generative 'actions' and 'concerns'. Generative action can be seen in behaviours and activities which enrich the next generation through (for example) family, community or political involvements. Generative concern refers to an individual's felt sense of caring about the next generation.

Lawford *et al.*'s (2005) research reports evidence of generativity (as assessed through questionnaires) in their sample of late adolescents over a three-year period. In common with research considering the construct in adults, evidence of adolescent generativity predicted good psychosocial adjustment. It should be noted here, however, that the development of generativity is closely associated with prior experience of 'authoritative' parenting. According to this account, the encouraging view of adolescent identity would seem to exclude more troubled adolescents.

1.6.3 Storied Selves

Some contemporary approaches to adolescent identity preserve the key tenets of founding theories but emphasise the construct as a psychosocial 'storied' project (i.e. Cohler, 1982; Habermas & Bluck, 2000; McAdams, 1993, 2001). From this perspective, adolescence is proposed as the life stage when a life story *emerges*, rather than forms. Again following Erikson, (1958, 1968) the life story is thought to emerge through interpretation and integration of the past, and the formation of a story which can accommodate the past is thought to be an important key to self-continuity and self understanding. In McAdams' (1993) terms, in re-storying the past we create a self that is made 'whole and purposeful' (McAdams, 1993 pp91-92), through it having been embedded in 'a coherent and meaningful story'.

McAdams (1993) imagines the storied self to be populated by several sub-selves (which in common with Kalsched, 1996, he terms 'imagoes'). These imagoes

exist in dialogue with one another as our internalised relationships with significant others. They also comprise 'life story derivatives' of early object relations (McAdams, 1993, p131). Inner imagoes also express many other aspects of the self including past, present and future selves; undesired selves; and idealised and possible selves (see Markus & Nurius, 1986). They also give voice to both cultural and personal values. In this respect, McAdams' theory of the self finds many areas of confluence with post modern formulations which see the self as comprised of many selves and voices in dialogue; and which see the self as an evolving narrative project (see McAdams,2001).

1.7 Theorising Self and Identity

In reviewing the literature above, it is important to stress that the 'self' is a theoretical construct. The following section of the introduction therefore moves into more theoretical territory. The purpose here is not to find a finite definition of the self but to open up some possibilities in the way we might think about it.

1.7.1 Self as Multiplicity

Although the self is commonly viewed as a unified singular object, it can also seen to be composed of many aspects or sub-selves (i.e. Fairbairn, 1954; Klein,1953, 1975). Various aspects of the self can be imagined as comprised of internalised objects, some of which may be unacceptable and thus 'dissociated' from present awareness. Other aspects of the self may be drawn from the voices of our present social relationships, or may exist as imagined or possible selves (McAdams,1993; Markus & Nurius, 1986).

Some contemporary theories of the self have taken ideas of multiplicity further (see Kinsella, 2006). Indeed, various post modern and post-structural theories have challenged assumptions about the nature of the self as unitary, fixed or coherent (i.e. Gergen, 1997; Lyotard, 1979). Within some of these perspectives, selves might be seen as indivisible from the discourses in which they are situated (i.e. Antaki & Widdecombe,1998). The self might also be seen as made up of a 'fabric of relations' which are both interior, as the internalised voices of others,

and exterior, as the voices composed of our social relations (Lyotard, 1979). In keeping with these perspectives, recent developments in clinically orientated theory have centred around ideas of the 'dialogical self' (i.e. Hermans, 1996a; Hermans and Dimaggio, 2004; Hermans, & Kempen, 1993; Lysaker, 2001).

1.7.2 The Dialogical Self

Dialogical self theory emphasises the dynamic interplay of internal and external voices in the constitution of the self (Hermans and Dimaggio, 2004). Here it is proposed that when a person speaks, they do so from a particular position in space and time, which always involves at least one other voice positioned in relation to it (in the environment or within the interior self). Although we may not be aware of the different aspects of our self, these different voices 'interanimate each other' and thus bring significance and meaning to experience (see Bakhtin, 1981). The dialogical self is thus an intrinsically relational theory which views the self as dynamically constituted by other voices (both personal and social).

Dialogical self theory also strongly emphasises narrative ideas (e.g. Bruner, 1986; McAdam, 2001; Polkinghorne, 1995; Sarbin, 1986). It therefore incorporates a core interest in the way people organise their experiences of self and world through the stories they tell. According to Kinsella, (2006), in thinking of the self as composed of many different self-positions and in combining this view with narrative ideas, dialogical self theory is able to emphasise issues of self agency in a way that other post-modern theories do not. It is important to note that in keeping with the self proposed as multiplicity, personal narratives do not necessarily follow singular and seamless plot lines. Instead, the self is considered as something found and revised among several complementary and competing stories (Greg, 1995; Hermans & Kempen, 1993).

It is also important to note that it is still possible to talk of 'coherence' or integration of the self within the concept of multiplicity. Coherence, for example, might be described as an ongoing synthesis of multiple self

representations and identifications which are organised within our personal narratives (Russell & Van Den Broek,1992). Dialogical Self theory has been applied across a range of mental health problems, particularly psychoses (Lysaker, 2001). It has also been applied (in both therapeutic and research contexts) to problems such as substance abuse, (Klion & Pfenninger,1997) and trauma therapy (Wigren,1994). Several writers believe that there is a link between incomplete, chaotic or impoverished narratives and mental health problems.

1.7.3 Self Identity within this Research

This study has approached the self by drawing from a body of developmental and clinically-orientated literature which views the self as something which initially forms within early caregiving relationships and which then develops in reference to them. Adolescence is seen as a key period of transition in which a complex story of the self first emerges; and in which there is a special need to make sense of past experiences in relation to present circumstances and imagined futures.

In drawing from developmental, psychoanalytic and post modern approaches, this research also describes the self as a non-unitary phenomenon, whose aspects can be utilised defensively or adaptively. As such, the self can be considered as a dialogical process involving interior voices, those within a wider social and cultural world, and those that are imagined and possible. As this self moves and develops through time it is part of a narrative process. Making sense of this changing narrative in the context of present relationships and circumstances is where the making and remaking of self identity occurs.

1.8 Research Rationale

Traumatic processes and effects are continuing to be researched and theorised. However, they have rarely been considered from the subjective perspective of those concerned, an omission particularly notable in the case of adolescents. This present research aims to address this omission by making an exploratory enquiry as to adolescent experience of interpersonal trauma. In considering

trauma in relation to processes of self and identity, this research also adopts a holistic view of trauma within the context of participants' lived experience. In doing so, this research aims to enrich our knowledge of traumatic processes generally and of adolescent experience in particular.

It may also be that in researching participants' subjective experience this study draws on knowledge which is a particularly valuable resource. Clinical Psychology increasingly values the knowledge brought from client perspectives (Soffe, 2004). Accordingly, the development of interventions and an enhanced view of how to approach problems, can be seen as a partnership between clients and practitioners. To paraphrase feminist researcher Haug, (1987, p156): in drawing from personal accounts we gain from those who are the 'creators of their own ideologies' and who are 'experts' in their 'own experience'.

1.8.1 Aims of the Study

Primary Aims

- To explore how young people who have experienced early trauma construct a sense of self during adolescence.
- To explore how participants manage their identities in the context of relationships.
- To explore the resources and strengths that participants bring to their self constructions.

Secondary Aims

- To explore whether (and in what way) participants understand their adverse traumatic experiences in relation to their present identities.
- To explore aspects of coherence and continuity in participant self constructions.
- To explore how wider social factors have interacted with participant identities.

SECTION 2: METHODOLOGY

2.1 Research Design

Qualitative data was provided by in-depth interviews with five participants. The participants comprised three females (age range: 17-20), and two males (aged 15). All had experienced earlier abuse and neglect within the family environment. Interpretive Phenomenological Analysis (IPA) was used to analyse participant text.

2.1.1 Using Interpretive Phenomenological Analysis (IPA)

IPA (Smith, 1996a; 2003; 2004) was chosen as the most appropriate qualitative method for this study, though other methods were considered (primarily Discourse Analysis and Grounded Theory). IPA was chosen on the grounds that it is a method committed to the exploration of personal meaning-making which also aims to remain sensitive to social context. It is also a method suited to the study of a small number of participants (Smith, 2004). This latter condition was considered particularly important, as it was anticipated at the outset that recruiting participants for a study considering early trauma would be difficult.

IPA is a comparatively new qualitative method which shares some of the characteristics of established methods such as Grounded Theory (Glaser, 1992); the chief area of commonality being the aim to generate knowledge grounded in the research data. IPA differs from most other qualitative approaches in the value it places on ideography in which there is an emphasis on the knowledge drawn from individual cases. According to Smith (2004), an IPA analysis should allow the reader to parse the text in two ways, allowing for a group level of understanding, together with an understanding of some of the ideographic features.

IPA draws from the phenomenological philosophy of Husserl (1859 - 1938) together with the hermeneutic or 'interpretive' tradition. Husserl (1925) suggested that it was possible to transcend presuppositions and biases so as to

describe phenomena as they present themselves to us. These phenomena would thus be free from common sense notions, scientific understanding and other abstractions. Within a psychological framework, it is acknowledged that access to the phenomena under consideration is dependent on both participant and researcher interpretations. This two-stage interpretive process (a double hermeneutic) involves the participant trying to make sense of their personal and social worlds, while the researcher, in turn, tries to make sense of the participants. IPA admits the importance of the researcher in making jointly - constructed meanings, and also acknowledges that while the researcher may attempt to bracket preconceived notions, they cannot obliterate them. The researcher's own perspective can, however, be subjected to an ongoing reflexive awareness.

2.1.2 Reflexivity

Reflexivity is something that brings an awareness of the researcher's own contribution to the construction of meanings, within and throughout the research process, along with the realisation that such meanings are tied to the particular social context in which they emerge. Reflexivity will be utilised within this study in an acknowledgment of the role and indivisibility of the researcher (and the research context) from the research findings. Reflexivity will also be utilised to bring an additional perspective to the research, which may deepen the analysis overall. Such concerns are based on an acknowledgement that research augments experience rather than simply reflect it (Beer, 1997).

Accordingly, where appropriate, awareness will be brought to the role of the researcher's personal values, ideologies and experiences. This personal reflexivity also brings sensitivity to the ways in which the research might affect the researcher. A reflexive awareness will also be brought to the ways in which the research methods and analysis chosen for this project limit and define what can be found and what kind of knowledge is brought forth (an epistemological reflexivity). The aim of these reflexive processes is not to obliterate researcher

subjectivity, but to transform it 'from a problem into an opportunity' (Finlay, 2002, p531).

2.1.3 Supportive Data

In support of the data gained from participant interviews, reflexive diaries were kept during the research process. This practice contributed to the research in two ways. Firstly, researcher notes highlighted observations and reflections on the contextual aspects of the interviews. Secondly, these notes functioned as a means of developing a personal and epistemological reflexivity. Additionally, opinions and feedback of supervisors and peers were sought concerning the researcher's construction of themes in relation to participant text. Recruiting others' opinions and voices brought alternative perspectives to this research. These enriched the analysis and also prompted reflexivity as to over interpretation and the use of taken-for-granted assumptions on the part of the researcher. The reflexive diary and feedback allowed 'triangulation' (or the bringing together of different perspectives) of the data under consideration. Background information was also provided by the therapeutic and after-care workers who had provided the link to participant recruitment.

2.2 Piloting the Research Topic

This research began in the context of a specialist clinical placement which focussed on issues of child and adolescent trauma. At the beginning of this placement, a small-scale research project was instituted by the present author, which aimed to gain some initial information from which a larger project might evolve. The initial project used IPA to explore the same topic under consideration here but sought therapist perceptions. Some of the key themes and issues arising from this pilot project informed the direction of this present study.

Some of the key findings within the pilot project were as follows: (1) Therapists viewed adolescent identities as something strongly linked to early relational experiences. (2) Within therapeutic sessions, adolescents seemed to display non-integrated/dissociated levels of maturity. Aspects of the self such as sexuality,

for example, might have prematurely developed while an emotional awareness remained immature. (3) Adolescents were slow to change; and within therapy often adopted dissociative strategies (such as fantasy) which kept them separate from the therapeutic relationship (4) 'Change' was often marked by an increased sense of agency (Hynd, 2005).

2.2.1 Participant Recruitment

Participants were recruited from the specialist team in which the pilot project had been undertaken (a team specialising in the treatment of child and adolescent trauma). Participants were also recruited through the wider 'Child and Adolescent Mental Health' (CAMHS) team and from within a local organisation dedicated to the 'after care' of looked-after children (hereafter anonymised as 'The Home-Place'). Strict confidentiality was adhered to at all times. If initial interest was expressed by participants (in discussion with therapeutic contacts), participants were sent full details of the research, together with the relevant participant consent form. Participants were assured of their right to withdraw at any point during the research process. (see Appendix 1).

During the early stages of recruitment, several older adolescent girls expressed an interest, in addition to several boys in early adolescence. The youngest participants were excluded as they stood too far outwith the age range of most other potential participants. Three older adolescent girls expressed a strong interest in the research (and consented to take part). However, due to worries regarding confidentiality one participant withdrew from the research following a preliminary meeting with the researcher. A further two participants arranged to meet the researcher for the research interview, then failed to attend. Three older adolescent girls and two mid - adolescent boys finally committed to the research.

2.2.2 Working with Vulnerable Participants

Research undertaken with potentially vulnerable people (according to age or psychological susceptibility) can itself pose a risk to participant wellbeing. With particular reference to participants with histories of trauma there is also a risk of

retraumatisation (Finkelhor, Araji, Baron & Browne, 1986). Within this study, particular attention was therefore given to issues of participant trust, confidentiality and right to withdraw. Consideration was also given to the psychological support of participants, both during the research interview itself and following the interview, should it be required.

2.2.3 Main Ethical Considerations

An application for ethical consent to carry out this study was submitted to the Fife and Forth Valley Ethics Committee, detailing the researcher's intentions concerning the involvement of vulnerable participants (see Appendix 1). These included: (1) the researcher's intention to meet with potential research participants in person (where possible) prior to the research interview; (2) arrangements to debrief participants post-interview (if requested); (3) an undertaking by the researcher to monitor the research interview and unfolding process, in the knowledge that unresolved issues might be evoked and to maintain participant welfare as the highest priority; (4) an undertaking by the researcher to act with an appropriate duty of care if the participant was seen to require additional support. In this latter case, the researcher would (in consultation with the research participant) offer one or more of the following: (a) the recruitment of additional support from the participants' present therapeutic worker (where they had one); (b) a referral of the participant (by the researcher) to appropriate services; (c) a debriefing session by the researcher as discussed above. Research participants were also offered a summary of the research, together with the opportunity to attend a presentation of the research on its completion.

2.2.4 Special Methodological Considerations

Attention was given to the differing levels of maturity of the participants, particularly in relation to expected levels of cognitive development. Accordingly, it was anticipated that some participants might benefit from a more structured (and supportive) approach to the interview (Smith & Dunworth, 2003). It was also appreciated that participant experiences of early trauma might in

themselves impede the interview process and that memory processes and the ability to verbalise experiences might be affected.

2.2.5 Additional Ethical Considerations

Lastly, in working with participants with trauma histories, it was appreciated that the researcher could also be at risk of psychological distress. The phenomena of ‘vicarious traumatisation’ (whereby therapists internalise some of the client distress via processes of transference) has been studied in relation to therapists involved in trauma work (Affleck, 2004; Pearlman & Saakvitne, 1995). It was acknowledged that this might also be a potential area of risk within this present research: if so, appropriate supervision and peer support would be sought in the first instance. This matter was also something planned for consideration within the researcher’s reflexive diary.

2.2.6 Developing the Research Focus

Prior to the commencement of the research interviews, the researcher met with the first two research participants. The researcher first met with Marlene in the offices of ‘The Home- Place’. A few weeks later a meeting with ‘Teen’ occurred at the same venue (both participants, now age 20, had resided at ‘The Home Place’ till they were 16.) The reason for these meetings was twofold. Firstly, it was the researcher’s intention to give the participants further information about the research project and to initiate a degree of rapport and trust in advance of the interview. Secondly, there was an intention to gather information which would inform the research focus and in particular the construction of the interview schedule.

Salient observations from these initial meetings included the following:

- It was noted that both participants (and Marlene in particular) seemed relaxed and ‘at home’ within the office surroundings of ‘The Home-Place’.
- It was also clear that Marlene and the office staff knew each other well enough to joke about their shared understandings and knowledge and that

Teen stayed silent or issued a few brief words as she so pleased. A short diary entry at this time reads: *'I met Marlene and Teen in an environment where they felt accepted, at ease and free to be themselves.....This is where these participant identities are to be found – in these exchanges between participants and office staff – not in a contrived interview!'*

Despite these initial doubts, interviews were later instituted. However, they were informed by observations during these meetings, together with conversations the researcher had with Marlene and Teen at that time. These conversations provided the opportunity to discuss issues of selfhood in general, and to explore some important concerns that the two young women were currently experiencing in their lives. Two issues seemed prevalent within these conversations: the first was a focus on 'relationships' (finding them, valuing them and losing them). The second was a focus on 'the body' (this arose, for example, within discussions around self harm).

In response to these early meetings, both Discourse Analysis (DA) and Grounded Theory (GT) were considered as alternative methodologies. Potential problems in researching 'the self' were also put under scrutiny (particularly as concerned the potential breadth of the subject). DA was primarily considered with respect to the observed construction of participant identities within everyday interactions (as witnessed earlier). GT was considered as a means of preserving a broader and more exploratory idea of what 'the self' might be about. However, due to the constraints of this present project (concerning both time limits and an expectation of low participant numbers) it was decided to continue with the choice of IPA. It was also decided to focus on the relational aspects of participant concerns (this being a focus which had emerged strongly within the pilot project) while remaining mindful that this research would inevitably only offer one perspective of a much larger and more complex topic.

2.2.7 Defining Trauma within this Research

In developing the focus of this research, it was also important to find a working definition of trauma, one that acknowledged the relevant literature and which fitted the concerns of this present study. The participants within this research had been asked to take part on the basis of overt traumatic experience (abuse or neglect). This criterion provided a pragmatic starting point which ascertained that some experiences had occurred which would be considered traumatising from a professional perspective. However, in keeping with attachment and psychoanalytic theories, the research began from a position that considered a greater range of experiences as potentially traumatising, and which also would consider relational criteria as traumatising in their own right.

2.3 The Research Interview

In-depth semi-structured interviews were carried out with the five research participants. Participants were offered the opportunity to spread the interview over two sessions if they wished. Two participants decided to interview over two sessions, although one subsequently failed to attend the second meeting. The length of the interviews generally ranged between 1 ½ hrs. – 2 hrs. However, one participant (who was interviewed on two occasions) gave a combined interview length of nearly 3 hrs. Participants were interviewed at various venues according to their preferences. Two participants were interviewed at 'The Home-Place'; two others in their homes, and one within the 'Behavioural Support Unit' of his school.

2.3.1 Interview Schedule

The interview schedule followed guidelines suggested by Smith & Osborn (2003). Accordingly, the interview content focussed on particular areas of interest but retained some flexibility according to participant concerns. The interview schedule also broadly adhered to ideas of 'funnelling', so that more general topics at the beginning of the interview led onto more complex areas of enquiry as the interview progressed. The one exception here is that, in the interests of transparency, early attention was drawn to the context of this present

enquiry, this being the participants' prior histories of trauma (see Appendix 2 for the full interview schedule). The interview topics covered were as follows:

- Current Situation and Relationships

This section provided an introduction to participants' sense of themselves within their current life situation.

- Bad Times/ Good Times

This section aimed to explore whether participant identities centred on the traumatic experiences themselves or on other factors. This section also intended to encourage the reporting of strengths in addition to problems.

- Early Experiences

This intended to capture the flavour of early caregiver attachment relationships.

- Changes over time

This intended to evoke salient experiences and stories of the self over time.

- Current Relationships & Close Relationships

The first of these explored relationships of social support and companionship; the second explored issues of participant intimacy.

- The Whole Story

This section aimed to capture ideas of the self seen as a whole: including past selves, present identifications and future aspirations.

Participants were also invited to bring to interview (or to bring to mind) three special objects that seemed to say something about who they were. These objects could relate to past or present, and were intended as a means of prompting important memories and reflections.

2.4 Data Management

Participant interviews were audio-taped to digital format and transcribed in full. These recordings were then saved on to a computer and the original recordings erased. All personal identifiers were removed from the data and each participant was assigned a pseudonym. Transcripts were then imported to NVivo (a qualitative software analysis package).

2.5 Research Integrity

Qualitative research considers issues of reliability and validity in relation to research 'consistency' and 'truthfulness' (Appleton, 1995). Yardley (2000) has identified three categories by which such criteria can be considered. These are: (1) sensitivity to context; (2) commitment, rigour, transparency and coherence; and (3) impact and importance.

(1) Sensitivity to Context

This study maintained an awareness of contextual aspects of the research process and outcome. These chiefly centred on the identities of both researched and researcher as brought to initial meetings and research interview.

(2) Commitment, Rigour, Transparency and Coherence.

Commitment to this research area was evidenced by the researcher undertaking a lengthy clinical placement which focussed on the treatment of child and adolescent trauma. This allowed an immersion in the relevant literature and a close acquaintance with relevant clinical material. Commitment and rigour were further demonstrated by the researcher undertaking a small scale research project on the same topic as this present study which explored ideas to be developed further here. The pilot study also enabled the researcher to practice skills in IPA methodology.

Transparency and coherence have been sought by providing a detailed account of how the research was developed and the procedures adopted. Within the analysis itself, verbatim text has been included, thereby allowing the reader to assess the claims made by the researcher. Commitment, rigour, transparency and coherence were also issues which underpinned the researcher's relationship with the participants (together with their therapeutic contacts).

(3) Impact and Importance

One of the most challenging aspects of this research has been the realisation that this particular research topic is a neglected area of enquiry: such an omission surely

echoes the silence and lack of speaking rights commonly experienced by those that are abused. According to Brett (1993), research concerning early trauma is a topic of interest which emerges only periodically into cultural consciousness before being once again dissociated, repressed or denied. Similarly, Herman (1992) refers to the study of psychological trauma as one of periodic amnesia; and Pearlman & Saakvitne (1995, p2) evoke the cultural and political context of their therapeutic and theoretical work with trauma. The latter describe such work as 'subversive' and promote the necessity to recognise the 'forces within society that work to silence' those that write about and work with trauma. In keeping with these concerns, this study aims to bring awareness to stories which are less often told, and to interrogate those held by more authoritative or powerful voices.

2.6 Process of Analysis

A close acquaintance with participant texts was gained through listening to the audio recordings, and repeated readings of transcripts. Each participant interview was then analysed according to the principles of IPA (Smith, 1996). The initial stage of analysis involved a close attention to each individual interview text in 'hard copy' format in which preliminary thoughts and observations were noted. This stage of the analysis included summary statements, comments on language use and the assignment of descriptive labels, together with some preliminary interpretations (Willig, 2004). Each transcript was then reread and initial themes identified. At this stage, the analysis transferred to NVivo format and various tree nodes (corresponding to themes) were then developed. In considering the text once more, various alternative analyses were brought forth: some were discarded but many of these were incorporated within the pertaining 'tree – node' structure. In addition to the main themes (or trees), various sub themes (or lesser nodes) emerged which were grouped hierarchically beneath them.

Each interview was analysed in turn, before an initial grouping of themes across all texts was reached. Initial themes drawn from the first interview transcript informed later interviews. However, each interview was considered in its own right and themes which emerged in the later interviews were taken back to the earlier

interviews for consideration. In this way, individual interviews were periodically returned to and considered in increasing depth and in relation to emerging group themes. As the analysis proceeded, preliminary themes which were poorly represented were discarded and the text from which they had emerged was then reconsidered in light of the developing thematic structure.

The later stages of the analysis brought an increasing structure to the arrangement of the themes, as connections between themes were identified, reconsidered and various sub-themes and main themes were further developed and refined. This latter stage of analysis also brought a degree of reduction with the analysis as some ideographic elements were reconsidered in light of a coherent group analysis. The final themes pertained to the group as a whole but also highlighted some of the particular ways in which they were expressed within individual narratives.

During the process of analysis, it was clear that several thematic structures (or perspectives on the text) were possible. However, only four main themes were eventually developed. These themes seemed to be strongly grounded within all participant accounts and also seemed to open up areas of interest relevant to the research questions.

During the period when the analysis was being written up, there was further period of engagement with the text. At that time, one over arching, master theme emerged, which seemed to capture the concerns of the study as a whole. On completion of the analysis, the thematic structure comprised of the master theme, four main themes and several clusters of sub-themes. The master theme conceptualised the main concerns of the study as a whole. At a slightly less abstract level of analysis, the four main themes described particular aspects of participant self constructions. Each of the main themes also related to clusters of sub-themes grouped beneath them.

It should be noted that the inclusion of an overarching, 'core' theme for the study as a whole is something more commonly associated with 'grounded theory' (i.e. Glaser, 1992). However the inclusion of an overarching theme within this IPA study was

something which seemed to enrich and clarify the analysis. In so doing, this research has been guided by the advice of Smith (2003) who advocates adapting IPA methodology to suit the needs of the particular study.

SECTION 3: ANALYSIS

3.1 Profiles of Research Participants

Before the reporting of the IPA analysis, the following sub-section offers some brief background information concerning each participant. This information was gained by the present researcher in conversation with the participants. Some of this information was also provided (or confirmed) by the therapeutic and aftercare workers who had facilitated the participant recruitment.

Participant 1: Marlene

Present Situation:- Marlene is 20 years old and lives alone in an urban area. She works part-time in child care and has a long term boyfriend and good social support.

Chief/Overt Nature of Trauma:- Marlene was neglected, and sexually and physically abused by her mother. Marlene's family used drugs and alcohol and there were police raids to the home. Marlene and her younger sister were taken into care when she was 5 and Marlene was subsequently placed in a number of foster homes. Marlene was abused in two of these placements. She was sexually abused by a 'foster uncle' and 'foster brother' and was psychologically abused by a foster carer. Marlene spent 6 months in hospital (she thinks in a psychiatric hospital) following this experience.

General Information:- Marlene moved to a residential home ('The Home-Place') when she was 12 and stayed there until 16. While there, she received some Art therapy and received ongoing therapeutic staff support. Marlene now lives alone but keeps in close contact with these staff members. Marlene has a younger sister and two younger brothers. Her sister is in foster care, one brother is adopted and the third now stays with his mother. Marlene has some contact with her birth family. Marlene remembers feeling depressed in early adolescence (she still feels low occasionally and sleeps poorly).

Some observations/diary commentary:- Marlene was by far the most engaged participant. She was also the most content in her present circumstances and provided

one of the fullest accounts within this study. Of particular note is that a child protection issue was raised during Marlene's interview. Marlene had reported her own experiences of abuse within a foster placement and at the time of this research her younger sister still resided there. Following this disclosure, the researcher followed due protocols which included the writing of a letter to Marlene's social worker.

Participant 2: Teen

Present Situation:- Teen is 20, lives within supported accommodation and attends college. Teen reported that she had few friends and that she was unable to manage independent living. At the time of our initial meeting Teen was in the midst of a committed same sex relationship. However, by the time of the interview (4 weeks later) this relationship had ended.

Chief/Overt Nature of Trauma:- Teen spent the first two years of her life in hospital with a serious medical condition. On returning home, her parents couldn't manage her behaviour and Teen then spent intermittent periods in foster care. Teen was raped by an older half-brother (in his late teens or early adulthood) when she was 6 years old; and placed in 'The Home -Place' from 9 years old. At 18, while living independently, Teen was raped. At 19 years a close friend was murdered.

General Information:- Teen reported that she had been diagnosed with Attention Deficit Hyperactivity Disorder (ADHD) in childhood and that from about 9 years old she has self-harmed. During her stay at the 'Home – Place' Teen received some Art Therapy and ongoing support from staff members (she also saw a psychologist for a short time following her adult rape). Teen currently has very minimal relationships with her parents and has largely lost contact with the 'Home-Place' staff.

Some initial observations/diary commentary:- When Teen and I met for an initial meeting she was feeling reasonably good about her life. When we met again for the research interview, she had experienced a major loss. On both occasions, Teen generally talked in short sentences and often used few words, sometimes preferring

not to talk at all. Also of note is a diary entry which reads: *Making arrangement to meet with Teen was hard. Teen missed several appointments - and at the end of the research interview she 'disappeared' while I was looking the other way (which prevented us winding down and ending well). Notably, Teen had at least five mobile phones, which she kept in her pockets, however I could never reach her on any of them.* During the second meeting with Teen, she expressed an interest in receiving counselling and was referred to an appropriate agency. With her permission, her General Practitioner was informed.

Participant 3: Nina

Present Situation:- Nina is 17 and lives in a high rise flat in an urban area. This accommodation had been found for Nina, after a period of homelessness, at age 16. Nina attends college part time and has some friends living near (one very close). She has regular contact with a therapeutic worker.

Chief/Overt Nature of Trauma:- Nina spent the first 5 years of her life living with her grandparents. During that time she had no relationship with her birth mother but kept contact with her father. At 5 years old, Nina moved in with her father (and soon after his new partner and their new son). Nina was then physically abused by her father's partner for nine years. At 15 Nina was made homeless. Neither Nina's grandmother nor her birth mothers were prepared to have her live with them. During her period of homelessness, Nina tried to abduct her younger half sister.

General Information:- Nina began to have contact with her birth mother in later childhood (together with a half sister who lives with her). Nina started self-harming from early adolescence and has taken several overdoses. Latterly, she has become anorexic. Nina has weekly contact with her father and his partner but is estranged from her birth mother and her grandmother.

Some initial observations/diary commentary:- Nina and I met for the first time on the day of the interview. However, we had the time and opportunity to build rapport before the interview began.

Participant 4: Tony

Present Situation:- Tony is 15 years old and lives with his grandparents in an urban area. He attends secondary school, is doing well academically but requires ongoing support from the 'Behavioural Support Centre'. Tony has some friends at school. He generally has difficulties with peer relationships, preferring adults instead. Tony is often bullied and often enters into fights himself. Tony displays 'Inappropriate Sexual Behaviour' (ISB) in the school context.

Chief/Overt Nature of Trauma:- Tony was physically abused and neglected by his mother when very young.

General Information:- Tony has lived with his grandparents since early childhood. Tony has been bullied throughout his school career (he has also been victimised by teachers) and has moved schools frequently. In the recent past, Tony has received specialist therapeutic support in respect of ISB. Tony has a brother and has regular contact with his mother via. Social Work.

Some initial observations/diary commentary:- Tony did not choose to talk about his having had inappropriate sexual behaviour problems. The interview was held at the 'Behavioural Support Centre' of his school.

Participant 5: Sean

Present Situation:- Sean is 15 years old and lives with his mother, younger sister and younger brother in an urban area. He attends secondary school; is doing well academically; has some friends and currently has a girlfriend.

Chief/Overt Nature of Trauma:- Sean was sexually abused by his father (for a number of years beginning from about 5). As a young child, he was also aware of the domestic violence meted out by his father towards his mother. Later on, he learned that this sister had also been sexually abused by his father.

General Information:- Sean showed behavioural problems towards the end of Primary School and the beginning of Secondary School and was bullied and isolated by peers during this period. During the recent past, Sean was obliged to be a witness in a court case against his father (after which his father received a short custodial sentence). His father recently died. Sean has received specialist weekly therapeutic support over the past two years and is nearing the end of treatment.

Some initial observations/diary commentary:- I met with Sean in his family home. Sean was keen to contribute but elaborated little within the interview. In interviewing Tony and Sean there was no opportunity to meet before the interview (due to time constraints). In comparison with the three older, female participants the narratives of both Tony and Sean were shorter and sparser.

3. 2 Interpretive Phenomenological Analysis (Themes)

The following thematic structure is adapted from the guidelines suggested by Smith (2003). Themes are arranged hierarchically, with those encompassing more abstract concepts grouped above lesser themes which are more particular and fine-grained. Four main themes emerged from the text. These being: *'Ambient Violence'*, *'Rejection & Loss'*, *'Growth & Stasis'* and *'Trying to Make Sense'*. These themes related to different aspects of participant self constructions. In turn, each of these encompassed meanings within clusters of sub – themes. As analysis progressed, one key idea (or master theme) emerged which encompassed within it all of the four main themes together with their subsidiaries: this being the idea that all participants were engaged in a process of *'Trying to Find Coherence'*.

The following table illustrates the thematic structure for this study. The master theme for the study heads the table. Beneath this, four main themes are listed. In turn, these head two levels of subsidiary themes: 'lesser themes' (grouped to the left) and 'sub-themes' (grouped to the right).

3.2.1 Table of Themes

‘Trying to Find Coherence’ (Master Theme)

Main Theme No. 1 Ambient Violence

Lesser Themes	Sub-Themes
<i>Past Experience</i>	<i>Mundane violence</i>
<i>Continuing Stories</i>	<i>Threat/coercion/silence</i>
<i>The Past in the Present</i>	<i>Normalcy, fantasy & vengeance, nightmares (hunting/killing/abandonment)</i>

Main Theme No. 2 Rejection & Loss

Lesser Themes	Sub-Themes
<i>Pushed away/Pushed out</i>	<i>Losing space/hidden away, unwanted gifts</i>
<i>Rejecting/rejected</i>	<i>Confrontation, rejection of self & other</i>

Main Theme No. 3 Growth & Stasis

Lesser Themes	Sub-Themes
<i>In my own time</i>	<i>Finding voice, welcomed in/pushed out</i>
<i>Using the self/experience</i>	<i>Teaching/protecting, legacies of the self</i>
<i>Blanking it</i>	<i>Not knowing/not thinking</i>

Main Theme No. 4 Trying to Make Sense

Lesser Themes	Sub-Themes
<i>Contradictions</i>	<i>Unknown stories /special stories, accepting contradictions</i>
<i>Other peoples stories</i>	<i>Needing answers, blocks and deterrents</i>
<i>New connections/new stories</i>	<i>Not knowing/not thinking</i>

3.2.2 Figure 1: Schematic for Themes

The following schematic illustrates the central role of the search for coherence. Meanings embedded within all four main themes (together with their related sub-themes) relate to this key concern.



Figure 1: Schematic for Themes

3.3 Analysis of Text

3.3.1 Transcription Conventions

Within the following analysis, a number of transcription conventions have been adopted following (Jefferson, (1978). Researcher speech is indicated by italics, empty square brackets indicate omitted material and italic text within brackets indicates material included for clarification. A dash between words – indicates a hiatus or apparent change in sense, and a diagonal line / indicates an abrupt change in tone or sense making. Ellipsis points indicate a short pause and longer pauses are indicated as (pause). Strong participant emphasis is indicated by underlined words. Additionally, extracts of participant text are designated by NVivo paragraph numbers. ‘Main Themes’ are designated by bold type and two levels of ‘sub themes’ are indicated by plain text in 12 & 10 pt. fonts. Visual representations of the relationship between different levels of themes can be found at 3.2.1 (Table of Themes) and at 3.2.2 (Figure 1: Schematic for Themes).

3.4 Ambient Violence (*Theme 1*)

- Past experience * mundane violence
- Continuing Stories * threat / coercion /silence
- The Past in the Present *normalcy *fantasy & vengeance
- * nightmares (hunting/killing/abandonment).

A sense of ‘ambient violence’ was evident in participant accounts of past experience; in their experiences over time and also within their present situation. A sense of ‘Ambient violence’ seemed to suffuse participant experience within many contexts and was selected as a main theme on that basis.

Sometimes violence was overt, experienced by the participant or someone they were close to and violence was often part of the environment. Often, within participant accounts, a sense of ambient violence was evident in the talk and metaphors used by the participants, the dreams and fantasies they experienced and the ease with which violence was evoked and retold within every day mundane situations.

All five participants described early experiences characterised by violence. This was experienced within family relationships and also extended into broader social contexts. Violence was intrinsic to participants' early experience of self, and as that self was experienced within relationships.

In the following extracts, Sean, Marlene and Nina describe early experiences: the first of these occurs within the immediate family; the second involves extended family and the third and fourth involve a broader social context. Extract 1 & 2 suggests threat and violence as a normative backdrop to family life; and extracts 3 & 4 describe sudden and shocking experiences involving fear.

Past Experience

Extract 1: Sean, Pars. 37-39

"He (*his father*) was quite violent when I was younger.... to my mum ..

Were you aware of that?

Yeh I was and so was my sister and my brother....

[] We moved away when he moved out the house. I was only about five so....but I knew about him hitting mum and everything."

Extract 2: Marlene, pars,268 -270

.."a canny stand her (*her Aunt*) after the way she treated ma Gran....[]...locked her in rooms...n' she was nae allowed any visitors []..n' ma Uncle - he ... abused her (*her Gran*)..... ma Auntie said that ma mum actually took a baseball bat to ma Granddads knees.....".

Extract 3: Marlene, par. 51

"stuff a can really remember.. like when a wis wee... like the police coming in the hoose.... Wan night they searched through the hoose for drugs and that... (*describes extreme physical reaction to fear*)...when a wis younger a never liked the police."

Extract 4: Nina, Pars 369 -370

"....aye so I was absolute screaming and the next door neighbour called the police - because they heard all that screaming. They must have called 999 - and (*her father's partner*) was halin' my mum down the stairs [] My mum tried to run up the stairs

to get away from her but (*her father's partner*) was trying to haul her back down by the hair..... ‘’.

Occasions of violence were often juxtaposed with ordinary family rituals such as eating and washing, or occurred in the midst of an otherwise happy occasion. In Extract 5 for example, Teen is talking about the discovery of her rape at 6 yrs. old, and in Extract 6 & 7 Marlene describes instances of physical abuse (from her mother) which involve the cleaning and care of a child by an adult figure and a casual occasion of ‘fun’.

***mundane violence**

Extract 5: Teen, pars 152 -154

‘‘Dad came (*upstairs*) and asked where a was...I tried to move and a couldnae move and he’d seen me ...[]. He (*her half brother*) tried to cover me n’ ma dad had come in – n’ ma dad went mental [] - because he’d come back up - and I was to go down to my mums after I’d finished my pie.’’

Extract 6, Marlene, pars. 151-153

‘She (*her mother*) stuck screw drivers doon our ears....’
Stuck screw drivers?

Yeahto clean them..... Ma wee sister is eh.. a bit deaf ... you can hardly hear her properly when she speaks.... just because ma mum stuck the screwdrivers in her ears. She had tae get ... eh surgery in her ears...’’

Extract 7, Marlene, par. 49

‘‘..a can remember wan time... a wis’ jist comin’ back frae school.... It was a hot summer’s day, so we went intae ma grans.... hud a water fight n’ that..... Ah chunked water over ma mum. She turned roon’ and slapped me oan the back..... There wis a handprint oan ma back fir’ aboot 3 months.... Ah wis probably aboot 5....’’

Continuing stories

As participants moved through childhood and into adolescence, experiences of violence often continued; although sometimes featuring different people and other situations. Within these accounts, participants can be seen as having been

positioned. by more powerful others, in a passive role. In extracts 8, 9 & 10 Sean and Nina recount how the threat of violence and coercion acted to silence their voices and extend their experiences of abuse. In this, the wider social context plays an important role in whether the experience of violence can be spoken of, understood and uncovered. In Sean's account for example, his continuing silence about his abuse is reflected also in his mothers silence about her own. In turn, his mother's 'choice' and 'freewill' is evoked to justify a lack of action and support from the wider community. In Nina's account, the intervention of others is prevented by her fear of further violence.

A further detail to draw from the following extracts is seen in Nina's extract (10). As in other examples within her texts, Nina uses language which suggests further potential for escalating violence: '*a bit flesh doesn't go into a burning fire*'. In doing so, Nina likens herself (in relationship to the abuser) to a piece of meat, as merely a physical body. In using this metaphor however, other interpretations are also potentiated. Nina conversely, may also be alluding to a physical body which has agency and some choice in the matter.

***threat / coercion /silence**

Extract 8: Sean, Pars. 185-187

'He (*Sean's father*) was quite nastyand he was like: 'if you tell anyone you're going to get hurt or something'.... [] That sort of leaves an imprint on you not to say anything. [] I wasn't ready to tell anyone and I was scared that if I told people they would sort of say you're lying and everything. []

Extract 8: Sean, Pars. 185-187 (*Cont.*)

It was quite scary (*when his father was hitting his mother*) because I couldn't really do anything - and my brother and sister couldn't really do anything about it. Her work knew about it and my Gran knew about it but they couldn't really do anything either...

The work had known for a while but they couldn't really say anything because it was my mum's choice"

Extract 9: Nina par. 270

“ At the start it was just getting slap off the leg and that.. and then it started getting a slap off the face but then it got to punching and throwing me aboutand that one time she gave me a total kecker of a black eye and I had to go to school the next day - so she was raking about in the drawers and I was like - what was she doing and then she's like holding out this plug thing.... you put it into the plug and it makes a smell but it was the circle on and she was like: 'Pretend you fell on that'and then it got to a stage where she was always hitting me, always marking me.... always finding things to say - that I had done it with.”

Extract 10, Nina, Pars. 328-332

“She (*a guidance teacher*) was wanting to go to my house (*to confront the abuser*) and I knew that was the wrong step...because that's just not what you dae .. eh .. you dinnae go/ a bit flesh doesn't go into a burning fire does it?”

The Past in the Present

Violent relationships from the past often featured in participant accounts of present or recent relationships. This occurred in two ways: a shared history of violence was sometimes part of current relationships. This brought a kind of intimacy and a sense of belonging. However, it also brought with it a sense of normalcy, so that talk, memories, shared experience were suffused with ambient violence. The past could also be brought into current awareness in another form, in that knowledge of past experiences of violence, could bring anger; and from there, plans and fantasies of vengeance. Sometimes this knowledge pushed participants towards potentially dangerous situations, where they might *enact* vengeance. Violent relationships from the past also featured in participant nightmares, and were sometimes replayed as variants of actual events. In the following two extracts, Marlene talks about her current close relationships.

***normalcy**

Extract 11, Marlene, Pars, 215-219

“He (*her boyfriend*) has been through a similar thing. He’s seen his mum battering his dad em - see they poker sticks fir the fire he’s seen his mum batterin his dad wi that.”

So you’ve got something - you can share together?

“Aye me and his mum gets oan superb”

Right

“She says am like a daughter tae her”.

Extract 12, Marlene, Pars. 222-224

“Ma best pal she got sexually abuse an a wis the first to know about it.

And she shared that with you?

Aye – She’s got two bairns.... Aw her family they all say they’ll be for me”

Within the following extracts, there is a sense that attempts are being made to take some power back from abusive relationships. At 13, Marlene recounts her fantasy (and aborted plan) to stab her mother, and in extracts 14 & 15, Nina recounts the abduction of her half sister and her fantasies of taking vengeance against her father’s partner.

***fantasy & vengeance**

Extract 13: Marlene, Par.145.

‘.....Jus a’ the anger built up inside ...ah hud just come back from holiday...a wis at high school [] A hud got picked to go oan a school trip so a come back.... a hud goat a penknife a said tae the staff a wid take it wi me tae stab her..... The staff took it aff us’.

Extract 14: Nina, Pars 414-457

“I tried to kidnap my sister eh.....Aye, ah dream of doing it because my mum has got a bairn an awma wee sister ... []Ah stole her from the school but they come and took her back. [] ...ah was 16 and she was 11..... and I went and picked her up fae the school because my mum had been total nasty to me - and she was like: if I step in her driveway I’d get lifted because I’m no allowed near their door []

So I was like - well I'm no allowed to her door - she was like saying: 'you're never getting to see the bairn again' and that - and none of them liked me - but I went up to the school ehand I took the bairn from the school. [] I was thinking I would be able to treat her better than my mum..... [] She (*Nina's mother*) telt me no to go back and that - I wouldnae be allowed to see the bairn and so that triggered off my brain and ken ... I get these wee psycho thoughts and thatand so I decided one of my wee psycho thoughts was going kidnap the bairn and I thought I would get away with it - but I didnae."

"I just get wee thoughts that I want to go down and stab her (her *father's partner*) and that and I shouldnae have thoughts that I want to go and stab her - but that's the way she makes me feel sometimes. Like, ken we'll be sitting in the living room and we would just be sittin' like this and she'll be talking to me and I can see my eyes going I can just imagine punching her [] ... I actually get a wee play in my head going on and I've got to shake my head - get myself out of that thought... [] ..if I'm watching telly and I see something cool on telly I start having thoughts that I'm going to do that."

Something gives you the idea on the telly?

"Aye - and then I start getting thoughts of my own. And then I go into a wee fantasy world....Like thinking that I'm totally superwoman and thatand I'm going to kill off all those people that's been nasty to me - and then its going to be happy ever after".

* nightmares

Not all participants within this research recounted nightmares, but those that did, provided some of darkest and strongest imagery within participant accounts. The nightmares were violent and fearful and predominantly featured stories of hunting, killing and abandonment. The participant, (or animals and people she loved) were always the hunted, although sometimes the participant (as the protagonist of the story) might be a rescuer. In the recounting of dreams, some participant narratives seemed to jump between (or conflate) past and present; dream and reality. This is

evident in Nina's recounting of a nightmare at extract 16, and more so in Marlene's account at 17.

* nightmares (Cont.)

Extract 16, Nina, Pars. 480 -482

"....I was down the Dam, you know the Dam?"

A real Dam you're talking about?

"Aye - down the Dam".

Was that where you stayed one night when you ran away?

"Aye ...and then I was getting chased by these people - and it was like in my dream - they were total chasing after meI'm running - but I no moving - but they were total getting closer and closer and closer to me eh... and they total like battered me and they just left me hanging there ...".

Hanging there?

"Aye one minute I'm getting total battered and then the next minute I'm just hanging like - ken - fae a tree ... just hanging - and then they're running off - and then I total wake up and I total check that there's no rope round my neck " []

"I've had people over to stay (*at her flat*)...n' they've total like : I'm always shouting and that: 'Get away, dinae hurt me and no again' and ah that".

In Nina's extract, conflations as to dream and reality are seen at various points in the narrative. For example, Nina has evoked a real place which is part of a potent memory but does not designate it as such. She then proceeds to talk about being chased without clarifying whether this was memory, dream or both. This lack of coherence is also seen in Marlene's account. Marlene begins by describing her traumatic memories as a trigger for her nightmares and then proceeds to recount a past nightmare. She then moves to recounting a recent nightmare at the line '*the recent one was when a wis in Wishaw*', but here it is difficult to know whether the nightmare occurred in Wishaw, or whether the dream was about events that occurred there. At the line: '*This – it actually happened*', Marlene identifies her story as both. It is also notable that within a short narrative, Marlene jumps between descriptions of two very different relationships with foster carers.

Extract 17, Marlene, Pars. 170-179

“ I only get (*nightmares*) when I think about what happened –it’s like the nightmare a used to have - ma mum would come in the back, kill the dog; kill the foster parents; take me and my wee sister away -.the recent one was when a wis in WishawIt wis ma foster parent - she would make sure that I would wash clothes by hand outside in the freezing cold / this/ it actually happened - I got accused of doing the toilet on the clothes and that ...
.[] so I had tae wash them (*the soiled clothes*) by hand - out in the freezing cold..”

Nina and Marlene’s extracts also display evocative metaphors. In the line ‘*they just left me hanging*’; Nina evokes an image of the helpless position she has been left in during a dream narrative; (something which echoes her experiences of abandonment during the years of abuse). Similarly, Marlene’s extract also suggests an image of the way she has been positioned by abusive relationships (in life and in dreams). These apparently bleak metaphors and images may also contain within them some ambiguity: the phrase ‘just left hanging’ for example, certainly conjures a feeling of abandonment and stasis. It may also however, suggest the occupation of a reflective space.

Theme 1. Ambient Violence: Summary Points

- Participant identities (in the present) were constructed in relation to past narratives of ambient violence.
- Violence silenced participant voices, positioning them as passive in relation to powerful others.
- Violence was given a sense of normalcy within current relationships in which a history of violence was part of shared experience.
- Participants attempted to reclaim voice and some sense of agency through fantasies of vengeance.
- Wider family / broader social relationships had an important role in mediating whether participant voices could be heard.
- Within participant accounts of nightmare, fantasy, and real life trauma, there was a conflation of past and present; dream and reality. These disjunctive narratives suggested that in telling these stories about the self, participants lacked coherence (across time) and integration (in the present).

*** Reflexive Diary: Violence, Identity & Play**

Sometimes a sense of ambient violence seemed to escape out of the interview and into the social situation between researcher and researched. However, talk or allusions to violence seemed to have both a real and ironic tone. An extract from May noted the following:- At one point Nina announced that strangers were enemies and I only got into her home because I was OK'd by her therapist. She added (lightly) that she could throw me out the window if I messed up. This conversation occurred in the context of my own feelings on driving through Nina's neighbourhood and entering her home: An entry reads: As I drove up to Nina's High Rise - I was struck by a feeling of threat & isolation - her block seemed bleak and unwelcoming - 'hidden away'. I thought - of course you would be stuck/ sidelined here! When we met, we chatted as we looked out of her window and Nina gaily announced that I had parked my car right next to *'the most violent woman'* in the area. She then proceeded to recount this story about her neighbours: *'Aye.... and there was a 4 year old bairn - pure whacking people with golf clubs - all the trouble comes from that side of the street because she's a rebel''*. Nina had seemingly set the tone and parameters of the interview (within a described and actual environment apparently suffused with violence), and had introduced herself and her environment in reference to a host of violent metaphors. However, I also had the sense that Nina had heightened and mimicked the violence. At least two interpretations of this meeting are potentiated: perhaps Nina was delivering a series of veiled (or not so veiled) threats, but perhaps also she was doing something playful, ironic -was she playing with her identity - as she imagined she might be perceived - and as I might preconceive it? Interestingly, writers bringing a strong discursive (and critically aware perspective to ideas of the self, i.e. Parker, 2004) see such playfulness as a means of subverting static ideas of the self so as to open it up for further exploration. To extend this notion further, we might also see such creative playfulness (and ambiguity) in Nina's aforementioned allusion to the feeding/or freeing of flesh (her body) from an abusive 'burning fire'.

3.5 Rejection & Loss (*Theme 2*)

- Pushed away/Pushed out *losing space/hidden away *unwanted gifts
- Rejecting/Rejected *confrontation * rejection of self & other

Experiences of rejection and loss featured in all participant texts. Notably, when participants' talked of the most distressing aspects of their pasts, they often talked of the pain of rejection and loss rather than their experiences of abuse. Rejection and Loss could take many forms, an overt rejection of a child's expression of need; the unceremonious delivery of a child into care or a loss of relatedness with extended family members and siblings. More subtly it could also involve a rejection of the idea of the child as a person with needs and rights of their own, outwith those of the carer. Rejection and loss could range from the marginalisation of a child within family relationships to overt abuse and a negation of the idea of the child as a person with rights at all.

Pushed away/pushed out

In the following extracts Marlene, Teen and Nina describe overt rejections from carers, being pushed away from parental affection and being pushed out of the parental home. In extract 21, Nina describes a subtler form of rejection; involving her relegation to the smallest space in her father's new partner's home soon after this, Nina was also relegated 'a smaller space' within his affections and commitments. This sense of exclusion and isolation is also reflected in Marlene's account at extract 22, where there is a sense of being shamefully 'hidden' away' from social contact. Marlene and Nina's extracts (at 22 & 23) also recount their identification and rejection as the unwanted 'bad' sibling, while another is chosen as 'good' and 'wanted'.

Extract: 18 Marlene. Par. 137

"It wis jist afer Mum put CA to bed . Usually I jist fell asleep on the couch before going to bed. That night a didn'ta wis wanten a cuddle.....A wis pitten ma head oan her lap. She wis moven her knees.....Then she would go through to the kitchen an a would follow her. She wid dae stuff in the kitchen an a would try and get her attention ... she would push me away....."

Pushed away/pushed out (Cont.)

Extract: 19 Teen, Pars.129-137

“... I tried to run away the first day I got in (*the home*) . I got pinned to the floor....tried to go get and my mum and that. My mum and my dad and my social worker dropped me offI just tried to get them ...

[] I never saw her for ages”.

You never saw her for ages?

“About 3 years”.

Extract 20: Nina, Pars. 39-41

“all my family had a’ hud a wee bit shot of me...and when I turned 16 nobody else wanted a wee shot”.

Nobody else wanted a wee shot?

“No so I had to find somewhere else so I went into the hostel”.

***losing space/hidden away**

Extract 21: Nina, Pars.244-254

“I used to like go along there to stay at nights, but I didnae like it when I stayed there because there was this bed underneath the alcove in the living room under the stairs bit, that was where I had to sleep. And I hated it [] because it was like I was used to sleeping upstairs in my own bed [] and then you’ve got to sleep in a wee hole - ken what I mean? ...and then when your used to going to sleep in the peace and quiet and then there’s a big telly flashing in your face and there’s somebody saying ‘get to sleep, get to sleep’ but you can’t sleep eh.”

Extract: 22 Marlene, Pars. 186-192.

It wasn’t a happy time?

“For me - no....Ah can remember wan time when me and ma sister’s first foster parents would come up and see us but the (*current*) foster parent would lock me in the bedroom a wis nae allowed out cos a used to wet pants quite often.....”

So how did you see them?

“I never ...They saw ma sister”.

Why?

“She (*the foster carer*) never liked me she was always close to ma sister”.

***losing space/hidden away (Cont.)**

Extract:23, Nina, Pars, 156-158

“Everything was great until I was 6”

Really

“Until my wee brother came along - and he destroyed it for me”.

Why was that?

“.....I just like think she (*her father's partner*) treated me like her bairn - but when my wee brother came along and then she had her bairn - and so she didn't need me anymore eh - because she had hers”.

Mmm

“...and it then it just started going downhill from there - always getting hit on and that - off of her and it was like just got worse and worse.....”.

*** unwanted gifts**

In adolescence; rejection and loss sometimes occurred in more symbolic ways. In the following two extracts, gifts offered by participants to younger siblings, who they no longer lived with, were rejected by parents as worthless, damaged or dangerous. In extract 24, Marlene describes a rare social work supervised trip to see her mother and younger brother; and in extract 25, Nina describes her secret attempt to give her sister a gift.

Extract 24: Marlene, Pars. 127-142

“We (*Marlene and her mother*) ‘had an hour set eh ... it wis at Christmas time so a got Stevie a teddy in a bag. Mum said a spelt his name wrang. A gave him the present and a said: ‘Dinae let him open it till Xmas’. A came back that night - she phoned us n’ said...’eh Stevie’s opened it....

Why did yea gie him a present wi’ an eye missing?’ - Ah said ‘what are yea oan aboot?’ Ah wis doon, depressed - a didnae go tae school next day.”

Extract 25: Nina, Pars. 442-450

“We (*Nina and her mother*) fell out because I bought ma wee sister a ‘special sister’ necklace.....and I gave it to one of the lassies that stay in ma mum’s street. - I gave it to her to give it to (*her sister*) because ah wisnae allowed near her....that’s why we fell out because she was like “you broke that bairns heart!”

*** unwanted gifts (Cont.)**

Extract 25: Nina, Pars. 442-450 (Cont.)

Why did you break the bairn's heart?

“I don't know - I was only trying to give her a gift - and I wasn't allowed to give her itso I got somebody else to give her it for me..... and my mum phoned me up and started going mental at me ...”

Rejected/rejecting

In adolescence, some participants explicitly rejected the parent or carer who had rejected them. This sometimes led to open confrontation and the opportunity to voice feelings and concerns which had remained silent for years. For other participants a kind of covert rejection was only possible. Confrontation (in the main) was felt as a move towards self empowerment. However, confrontations were rarely met with a satisfying explanation and the response could be seen as a further rejection. Despite this, having the opportunity to speak was seen as a positive move, and having another side of the story was sometimes considered enough in itself.

***confrontation**

In the following two extracts, Marlene and Tony describe confrontations with their parents.

Extract 26: Marlene, Pars. 127 -142

“a wis wanted tae talk tae her aboot things that had happened when a wis young. She wouldnae even talk aboot it - she just changed the subject. [] Ah said ‘mum a want tae know aboot the things that happened to me when a wis youngah want tae know why it happened’.... She said ‘ah don't know anything aboot it’... Ah said mum am no stupid a know whit happened. She said ‘Ave got tae go an do ma laundry’. Ah said ‘mum we've goat an hoor tae see each otheryou could a done it before’. So a just walked oot - an a haven't seen her since”

Extract 27: Tony, Pars. 218-292

“.....she just said it never happened, that it was other things that happened.... [] She said that I never fell down the stairs, eh and that I was/I cannae mind what she said about the - [] - but she said - she said never pushed me down the stairs....”[]

Right - but you think that she did that? Is that because people have told you - or is it because somehow you have a bit of a memory of it?

“Mm... a bit of a memory.... [] Ah just mind that she pushed me down the stairs and I was in the hospital and then I got put up to grans from the hospital”.

Can you square that in your mind somehow - that she thinks one thing and you another?

“I dinnae ken”

Does it bother you?

“No really [] I just accept it now I ken her side of it.”

*** Rejection of self & other**

All participants within this research maintained some relationship with their original family. although some had ceased living with them many years ago. During adolescence, patterns of rejection had often been in place for many years; and chronic and habitual rejections by others were sometimes never addressed. Participants sometimes acknowledged the limits of such relationships but had little manoeuvrability within them. Instead, participants adopted a detached and ironic view, or allowed deeper resentments to be played out within mundane conflicts, which nevertheless, often positioned them as somehow ‘ugly’ or ‘worthless’.

In the following two extracts Nina describes her current relationship with her grandmother, who had been her first primary carer and in the second of these, Nina relates her own self rejection to the ways in which she has been repeatedly positioned and rejected by her. Nina then proceeds to suggest that her grandmother denigrates her, while keeping her own imperfections out of awareness. In Nina’s descriptions of her self in relation to her grandmother, there is a notable focus on her body, rather than Nina as a person.

* Rejection of self & other

Extract 28: Nina, Pars, 567 -569

‘‘Aye honestly if she says to me ‘go and put the kettle on’ and I said ‘nut’ - there’s a pure World War three—that’s because I just think she’s fat and lazy... []She total picks on me ...all the time - she bullies me – like, ken if I go in with a new hair cut or something she’s like: ‘That’s ugly, what did you do that to yourself for!’ Ken what I mean? - and I like it - so that makes me feel like really down because ah liked it - and then you go in - and somebody tells you it’s ugly..... I mean if you went in wearing a pair of trousers and somebody tells you they’re ugly you wouldn’t wear those trousers anymore but you’ve got that hair cut so you’ve got to live with it and somebody’s constantly telling you its ugly.’’

Extract 29: Nina, Pars. 879-882

‘‘I cannae do fat... I just cannae, I cannae be a size 10 ... I’m too fat...but that’s because all through my life people’s made me out to be fat ...so I’ll never let myself go fat or I’ll shoot myself’.

Who made you feel fat?

‘‘My Gran’’

All through your life?

‘‘Aye - all the way through my life.... []

This is the best bit - my Gran is so fat they wouldnae let her fly! ... They say she (*her Gran*) needs to lose weight or she’s not allowed on the plane and my Gran calls me fat! So... she’s got a problem with herself. I was already thin ... I used to be size 10 and then I was a size 8 but then I got down to 6 stone.... [] Oh well ... I just don’t like myself sometimes - so I just dinnae feed myself....’’

Theme 2. Rejection & Loss: Summary Points

- Loss and rejection were intrinsic to participant experience of self over time, and occurred overtly or within the small and apparently insignificant exchanges within interpersonal relationships.
- Rejecting the rejecter could be empowering but challenges to abuser versions of reality were often themselves rejected.
- Within relationships which were still maintained, a covert reciprocal rejection often operated, which continued to position participants as devalued.

3.6 Growth & Stasis (*Theme 3*)

- In my own time * finding voice * welcomed in/pushed out.
- Using the self/experience *teaching/protecting *legacies of the self
- Blanking it *not knowing/ not thinking

The theme of 'Growth and Stasis' concerned 'change' as experienced within participants subjective sense of sense of self. It also concerned a sense of being 'stuck' within continuing patterns of relating and ways of being. Sometimes, aspects of experience, and past and present relationships were missing or simply 'blanked' out.

In my own time

The theme of growth and stasis also related to the 'fit' between the person and their social environment. Sometimes (as in the case of Marlene) an increasing trust in both self and others was allowed to develop over many years in the context of supportive relationships. Sometimes however, the demands of the social environment outstripped changes experienced at the level the self (Nina and Teen). Here, there was a notable lack of supportive relationships, and participants felt ill equipped or angrily rejecting of externally imposed demands.

*** finding voice**

In the following extracts, participants recount a greater assertiveness and a growing acceptance of self. In extract 30, Nina, talks of changes within the relationship with her former abuser, and in extract 31, Sean talks of changes within his peer relationships, which he attributes to ongoing therapeutic work. A caveat here is that positive change was often limited and partial. In keeping with the prior theme (rejection & loss), change was sometimes possible only within the constraints of important relationships.

* finding voice

Extract 30, Nina 644-648

“Aye I argue with her all the time now (*her father’s partner*)....ah dinnae have a lot of respect for her in that way....because if she says something to me - I just fire straight back at her “[]

Is that a change?

“Aye..... A’ve got a personality now ...I know what a personality is”.

You didn’t feel as if you had one before?

“Nut because I was always so withdrawn ken- I didnae get to be myself ... but now I’m just like ...I wear what I want when I want - and then I’ll make up my own words and I’ll just be me - and if you dinnae like it then don’t come back - ken what I mean”.

Extract 31: Sean, Pars 159-163

“If somebody was really nasty to me or anything I’d probably just tell them to back off or something like thatif they were cheeky to me or something

That’s quite new because I never used to be like that; I never used to really say anything if someone was cheeky to me. [] I

think working with ‘The Team’ (*a specialist therapeutic service*) is mainly to do with it....they did help me a lot ... I don’t think I would be getting more confident if I didn’t actually go to see them. []

If I’ve had any trouble or anything I can tell (*his therapist*) about it.....Instead of keeping it to yourself - you can tell people about it”.

* welcomed in/pushed out

In the next two extracts (32 &33) Marlene talks of her experience of being welcomed into a number of supportive relationships (in which a changed sense of self could slowly develop) and being subsequently freed from her isolation and silence. By contrast, in extracts 33 & 34 Nina and Teen talk about being pushed into changes (and an increased ‘independence’) that they feel ill equipped to meet.

Extract 32: Marlene, Pars.66

“Everything that had happened to me ehh ..(*when*) ah wis younger I used tae just blank it..... When I came to ‘The Home- Place’ -- yea get yer key worker an yer backup worker ... and their usually the wans yea go and talk tae. If ah trusted a member i’ staff- I’d talk tae them.....

Extract 32: Marlene, Pars.66 (Cont.)

A' used tae no talk about it - keep it tae maself - just let it a get build up and go intae ma room and no dae any thing just fa' asleep depressed in that...."

Extract 33, Marlene, Pars. 79-79

"I first went there (*The Home Place*) when I was 12 .

[]The staff used tae walk aboot the hoose tae see if a wis in ma room - a wis always in ma room - a wouldnae come doon an interact wi the others".

Why do you think that was?

"At the time a think a wis just needen ma space". []

So ...what made you come out of that?

"One tae one wi staffem just talking about ma life an really gotten to know the staff. [] Ah think it was two years before I started to talk about it – [] Whenever I started to talk to staff about it I always felt better in masel - cos a got it oot and the staff always said if you need it - any time - just come and talk".

Extract 34, Nina, Pars. 35-12

"...I'm only a bairn, I shouldnae have my own house... I ken I'm no a bairn - but I just didnae feel that I should have my own house..... Ken that word Independence? ahh hate that word.....People use it against you, 'You've got to be independent' - an ah that... Shove your independence! - ken what I mean".

Extract 35, Teen, Par 282

"That's how I got back to 'The Home-Place' (*after a brief period of independent living*) because I wouldn't eat..."

And the self harming?

"..Aye - and drinkin.... "

Using the Self/Experience

Where positive change was felt, participants expressed a need to use knowledge of their own experiences to help/protect/teach others and to pass something of themselves on. In using self and experience, participants drew on adverse experiences. They were also inspired by their therapeutic experiences, and by other relationships that they had worked to build. Participants' also drew creatively from

limited past resources in order to create positive and generative stories for themselves and others.

*** teaching/protecting**

Extract 36: Marlene, Pars. 241-242

“...aye helpen other people.... cos am no wanten other people to go through what a went through...even the bairns up at ‘The Home-Place’ - sometimes they’ll need tae hae a talk ..ah..always talk tae them about things ... try to keep them oot ae trouble”.

Extract 37: Sean, Pars. 215-2125

“When I got into 2nd year I started to actually knuckle down because I wanted to get a good job and everything when I’m older .. [] I think I’m going to be a psychologist or something. I just wanted to help people and I think that obviously ... if I’ve experienced it -maybe it’ll help me when I’m trying to help other people”.

Extract 38: Nina, Pars, 826-832

I’m going to be a CPN (*Community Psychiatric Nurse*) when I grow up”.

Are you?

“I am, I start college in October to do Psychology.....Aye because I want to be Sara one day (*her CPN*) Hmm ...just as good as Sara - because I want to help everybody like she helped me.I’m going to kiss it and make it all better”.

*** legacies of the self**

In the following extract, Marlene is talking about a ‘treasured object’ (a photograph) of relatives that live abroad. Marlene has been separated from all her relatives since early childhood. There is a sense in this extract (as elsewhere in her texts) that Marlene is involved in collating material which will enrich her own (and her brother’s identity) as something which has continuity across time, and which is part of a family lineage of worth and value.

Extract 39, Marlene, Pars. 307-311

“This is actually – eh - (*her grandfather's*) sister...she stays out there -and she came over ...eh...one year ...and gave it to ma granddad and he just passed it (the photograph) oan tae me. A goat it oaf ma auntiewhen eh ma gran and that died - cos a goat some o ma grans stuff and ma granddads stuff.Eh ma granddads jewellery and that ...ave goat that in the hoose but that's for ma wee brother ... Ma granddad said he that he was wanten him to have his watch. ... His cuffs an that. He's goat a A on it fir (*his name*) an that. I'm keeping it until (*her adopted brother*) is 18. A spoke tae his adoptive parents an they said you give it to him when you think he's ready. Ah said well - all give it tae him for his 18 birthday”.

Hmm Hmm

“An ave goat eh ma grans good watch - and (*other jewellery*) Ah wear them sometimes- but her watch- a just keep it in the box”.

Blanking it

Within participant texts there were many instances of lost or missing information/experience. Sometimes this seemed primarily due to a lack of memory (as seen in Teen's text). Sometimes there seemed to be recall of events but with little attempt to attach further meaning to relationships (Tony). However, although the 'blanking' of experiences was told from the position of the individual, it was something that arose or occurred in relation to others (either in the past or present). 'Blanking' was therefore an interpersonal process: in which participants were subject to the 'blanking' of their experiences by others; when difficult experiences were either glossed over, or ignored.

In extracts (40 & 41) Teen talks of her poor memories of being put into care and her impoverished memories generally, and Tony talks about his lack of knowledge about his mother. In extract 42, Nina talks about her father's silence during her physical abuse (over a nine year period) and in 43, Teen talks about the silence surrounding her early experience of rape.

Extract 40, Teen, Pars, 139-141

“I dinnae ken... I cannae remember (*about being put into care*) - I think ma mum and dad asked me to be put into care”.

You think your mum and dad asked?

“Aye.....I cannae remember half ma background”.

What do you think of that- not remembering?

“Its bad”

Would you like to remember?

“Some of it”.

Is there anything good that you can remember?

“Nut. (*pause*) ... not that I can remember... I’m tired”.. ..

Extract: 41, Tony, Pars. 36-51

What do you remember of her (his mother)?

“Eh no much.”

What sort of person do you think she was then?

“I dinnae ken.”

Do you have an idea of what sort of person she is now that you’ve grown up a bit?

“Nut.”

Do you care what sort of person she is?

“..I dinnae ken.”

Extract: 42, Nina, Pars. 478-479

‘And what was your dad like through (the abuse)

‘My dad dinnae do anything’.

Did he know?

“Aye but he says he wisnae able to dae nothing about it because he would git it as wellHe wisnae there - but he was there if you ken what I mean - eh because he was always there as my dad.”

Right, how do you mean he wisnae there as well?

“Cause he never helped me”.

Did he not?

“No - he just was like he was like a wee shadow in the background”.

Extract: 43, Teen, Pars. 194-198

“Ah think it (*the first rape*) was just the once - I’m no sure...”

Did your mum and dad speak to you about it afterwards?

“Nut - not that I know of”.

Did you speak to anybody about it at that time?

“Nut.”

Blanking can also be seen as a process that had continuity across time: as something begun in earlier experiences, which then extended into present experience. This is seen in participant relationships with others, and also in participant relationship to self. In extract 44, Nina talks of the continued 'blanking' of aspects of her relationship with her father and in Teen's extract at 45, a kind of self induced blanking is achieved through the use of self harm.

*** not knowing/ not thinking (Cont.)**

Extract: 44, Nina, Pars, 382 -385

"a dinnae ken - he's - (*her father*) - like shy with me."

He's shy with you?

"Aye, he's dead weird - cause he hardly ever talks - like - the only time he'll talk to you is if you're going to talk about football or if your gonnae talk about drink - but he'll no talk about anything else... you'll sit there and you'll be in for hours and he'll no even acknowledge that your in - and then turn around - and - 'Hiya when did you come in?' - I've only been sitting there for 2 hours!"

Extract 45, Teen, Pars 227-236

"I cracked up" (*after the second rape*)

You cracked up?

"Aye... that's how I started slitting my arms with my razor blades"

[]

"Smashed a vodka bottle and dug the top of it into my arm".

Was that right after it happened ?

"10 minutes after it happened".

Can you remember what you were thinking then?

"Peed off - confused I think - I was thinking about a lot of things that's all the things I can think of"

...and the bruises -where did they come from?

"No I don't know where I got that fae.... and I cut that - (*her hand*) - a couple of weeks ago when I put my hands through the window ... my ex was getting to me and that.....and ah just had stuff going on in my mind - she wouldnae talk to me - so I got really pissed off and put my hand through my bedroom window..".

It is important to pause at this point and consider the continuities in Teen's experiences. Using the examples of her first and second rape; and her early and later experiences of rejection, it is possible to see a continuity of failed reflective function.

Teen's early care giving relationships did not provide her with the kind of scaffolding necessary, for her to talk about and make intelligible the rape and the rejections. Within her present situation, Teen now struggles to make the second rape and the rejection by her partner intelligible. Without recourse to language and social relationships in which these experiences can be talked about and explored, Teen instead, appears to blank these difficult experiences via self harm.

Theme 3. Growth & Stasis: Summary Points

- Positive change within participants' sense of self was marked by increased assertiveness (the finding of voice); and emerged within supportive relationships.
- Participants rejected externally imposed changes when they were out of keeping with those at the level of the self.
- When positive change was experienced, participants wished to use their own selves and experience to teach and support others.
- Aspects of participant experience and relationships were blanked out from awareness or remained static and unchanged, when they were neither remembered nor reflected upon by participants and those within their important relationships.
- The blanking of experience (by self and others) had continuity across time.

****Reflexive Diary: Dissociation from the Text?***

Within the analytic literature, it is accepted that therapists can 'blank out' (or dissociate) as they block out difficult material, or reflect their clients dissociation within the transference relationship (Pearlman & Saakvitne, 1995). Sometimes it felt that in maintaining a close relationship with participant text, I too was subject to a kind of 'blanking'. A diary entry from May, recounts the following: I have just transcribed a very difficult bit of Teen's text. I listened to this at the interview, and have now read it in the transcription – I am very distressed by this – I'm going to blank out this bit of text so I'll never have to read it again – nevertheless it's still somehow imprinted on me''. An entry in July also reads: Oddly, every time I attend to parts of participant text which might (in a clinical sense) be described as dissociative, I start to fade off. I am not having a therapeutic relationship with the speakers of these texts – but I am having an intense relationship with their text – perhaps I am also reflecting/echoing their dissociative processes.

Additionally, the interviews themselves were often very potent experiences; with participant stories – as told in the moment 'hanging around' me for weeks/months.... There are some similarities here between research and clinical practice – perhaps more so than I am comfortable with – It may be that qualitative research such as this (which considers difficult material) is a potentially hazardous psychological endeavour (I am thinking here of 'vicarious traumatisation'.) There is also a sense in which a research process feels less protected – less boundaried than a therapeutic process. In July, a further entry reads: Partly, in view of the above considerations I have operated a degree of censoring in the reporting of participant text. This decision is in itself however, not without its problems. If such things cannot be read, reported or spoken for fear of disturbing the reader (of contaminating them?) – is this not a disservice to the idea of honouring participants' experience? Perhaps this is one of the reasons WHY these stories stay hidden, untold – and therefore unprocessed – and remain instead held only by those who have experience it.

3.7 Trying to Make Sense (*Theme 4*)

- Contradictions *unknown stories/special stories *accepting contradictions
- Other peoples stories * needing answers * blocks & deterrents
- New connections/new stories

All participants were engaged in a process of trying to make sense of their identities, within their present social worlds and over time. Some participants had more personal and social resources on which to draw, but the need to find answers concerning the past, and to make sense of the self within present relationships was expressed by all. Sometimes, participants were actively involved in reconstructing their past from what little material could be found, while others took more tentative steps. In doing so, there were many contradictory and incomplete stories of the self to be negotiated. Sometimes participants had little choice but to accept the contradictions as presented, so as to preserve damaged relationships; this however left uncomfortable gaps and inconsistencies in experience.

Contradictions

In recalling their past, participants made use of positive and nurturing instances within a general picture that was often meagre, fragmented or contradictory. In recounting stories, in which participants had felt valued, loved and accepted, participants seemed to draw continuing comfort. However, as elsewhere within participant texts, these protective stories were retold within a broader narrative which was riven by contradictions and inconsistencies.

In extracts (46,47 & 48) Marlene and Nina recount some nurturing and protective stories from past family relationships. Yet at extract 49, we see that Marlene also holds awareness that the role of these relatives at the time of the abuse is unclear (elsewhere within this analysis, Nina also made her intensely negative attitude towards her grandmother clear). A further contradiction is seen at extract 50, when Marlene evokes her father's role as daily carer within the family home, despite the apparent chaos within the family at that time.

***unknown stories/special stories**

Extract: 46, Marlene, Pars.105

“I’ve always been ma Daddy’s girl ...even when I first went intae care I always said: Tell me what happens tae ma Dad - an ma Gran and ma Granddad - cos they’re the wans I wis close to oot i’ ma hale family”

Extract: 47, Marlene, Pars. 338

“When a saw her ma Gran (*after years of separation*) she actually turned roond and said ...’Hello ma little Princess’That’s whit she used to call me a ’the time ...[] When a wis wi’ ma mum a wisnae happy - but a always looked forward to the weekend (*when she stayed with the grandparents*) - Me and ma sister both loved it”.

Extract: 48, Nina, Pars. 172-178

“ My Gran would get me up in the morning and get me dressed for nursery - she used to take me in the shower with her ... I can remember being that wee she had to hold me to wash my hair”.

You can remember that?

“I can remember that - It’s brilliant! - and then - through the porch - that was where we used to have our dinner and that.... I used to sleep wi’ ma gran .. because I always wanted to be beside her [] Now a dinnae even like her ...”

Extract: 49, Marlene, Pars. 313

“Am no really sure (*who in family knew about the abuse*) - cos ave been told a lot i’ different stories by different family members n’ that.”

Extract 50, Marlene, Pars 39-40

So when your mum didn’t look after you - was dad around?

“Yeah - eh - he was in a lot I trouble wi’ the polis, n’ he winae livin wi us - he wis in a hostel.” []

How about the basic necessities- food and stuff did she - (her mother) - look after you in that way?

“It wasn’t actually her. It was ma dad.”

You were saying he was.... in a hostel?

“A homeless hostel ...”

(There was a break in the interview here – later in the interview Marlene recalled her father being around at tea time and at night.)

Contradictions which hampered participants' ability to make sense of their identities across time were also seen within their current situation and relationships. Participants often seemed to have little option but to 'accept contradictions' so as to preserve some limited but valued contact. This is seen in Nina's extracts at 51 & 52 when she acknowledges her father's silence and collusion in her physical abuse while also describing her primary need for this relationship. It is also seen in Marlene's extract (53) when she talks of her continued contact with a foster carer (who she has described as abusive) in order to maintain some limited contact with her younger sister.

***accepting contradictions**

Extract 51: Nina, Pars. 764-774,

"I hated him for that (*staying silent during her abuse*) but I dinnae know - I just really love him like since I've been grown up - I just need him there".

Yeh

"So I've got a lot of time for my dad even though he's not got a lot for me"

Extract 52: Nina, Pars 810-812

"Everybody that I've trusted in the past has let me down - it makes me doubt a bit more".

Mhh.. what about your dad - has he let you down or is he okay?

"No he's not let me down - my dad can't let me down - I love him too much to let me down - because anything he does I just brush off."

Extract 53: Marlene, Pars. 203-210

"I got accused of doing the toilet on the clothes and that " (*Marlene describes abusive behaviour*)

-You're obviously not in touch with that foster parent.

"Got tae. Cos a ma sister".

**** Reflexive Diary: Left Hanging***

As researcher within this project, my involvement in participant lives has been limited. However, this research has generated some substantive 'unfinished/unknown' stories of its own and has left a host of questions which have not (as yet) been answered. One diary entry reads: What is the story – what are the facts - what is the end of Marlene's story concerning the abusive foster placement? And – if Marlene is to be believed - why is her sibling still living there? This story makes no sense. It should be noted that at the completion of this research no further information had come forward concerning Marlene's account – a letter of enquiry had been sent to the social work dept. concerned but no reply received, and those still involved with her welfare and wellbeing at 'The Home Place' seemed unaware (or unable to share) details of the events in question. A recent entry also reads: In writing up the analysis, I'm troubled again by unfinished stories - is this how silencing happens? Is this how people stop trying to make sense? – Questions sent out to the world are met with ...a blank response– Perhaps I've been 'left hanging'

Other Peoples Stories

The need to find answers was considered a potentially healing or integrative move (something seen in Teen's extract at 54). However, this extract, and the two following from Marlene and Nina (55 & 56) demonstrate that access to participants past narratives was often controlled by others. Participants were therefore subject to others interpretation of these stories, or their blocks to further elaboration. Again, the desire to make sense of participant stories seemed compromised by attempts to maintain existing relationships. Sometimes, there was a sense that past narratives of the self had (at least temporarily) been surrendered; and were instead owned and contained within the official documents of the social work department (extract 57).

*** needing answers**

Extract 54: Teen, Pars 295-351

What is it that you're angry about?

"I dinae ken - probably a lot of stuff....."

Can you remember what that might be?

"Probably ... because I'm still trying to get an answer out my mum - about why they put me into care".

You want an answer?

"Aye but they won't give me it."

Have you asked your mum?

"Uh huh"

What did she say?

"Just said it wasn't her who put me in care - it was my dad."

Did you ask your dad?

"Un huh"

What did he say?

"He wouldnae gae me an answer."

How would be if you could get answers from your mum and dad?

"I think I would change like."

Do you? How do you think that would affect you?

Probably set me off on one - but then - that would be it - I would be okay when I found out the answer ...

Even if it was a negative thing?

"Mhh I would rather know and get it over and done with....I've been asking for a long time - wanting to know why I've been put in care - and why I'm the way I am.

How do you mean- the way you are?

The self harm and that...but they won't tell me ..."

***blocks & deterrents**

Extract 55: Marlene, Pars, 115-117

"Ma dad and that knows that (*Aunt*) is the only one a can talk tae about ma family.... But nut - ma step mum (*father's new partner*) wisnae happy wi it. Ah wis talking to (*Aunt*) aboot family things an she wisnae havin it. - an ma dad kens it. So me and ma dad didnae talk fir a while..."

Extract 56: Nina, Pars 632-665

" I tried to speak about my mum the other day and asked my dad - and like (*his partner*) just jumped in - like she was a fuckin rotwieler man! - like pure - ' You dinnae need to ken about that' - and awthing ...

Extract 56: Nina, Pars 632-665 (Cont.)

...and then my dad looked like he was about to cry - so I wouldnae pressure my dad into talking about anything like that - I'd just rather not know eh - [] - so I just walked away It was like one tiny little thing that I wanted to know - because I've been told three stories and none of you can even bring it to yourself to even tell me - and then I was like - 'Dad take me up the road' and he took me up the road - and he didnae talk to me all the way up''.

Extract 57: Teen, Pars. 488-492

I didnae like talking about ma mum or ma dad.

Why?

Because they just didnae care. I dinnae even know know them properly.

You don't know properly?

I don't want to either, well I do but I dinnae.....a canny remember ma background..... It's all written on a thing....on ma history background report.....''.

Sometimes, participants had no further access to knowledge which would shed light on incomplete stories and participants were left to try and make sense of the seemingly incomprehensible. Again, access to stories of the self seemed to be something controlled and owned by others. Perhaps the strongest example of this is Marlene's extract at 58. Within this research, Marlene has frequently recounted her distress in life and in dreams following a period spent with a foster carer she has described as abusive. She has also discussed the necessity of keeping some contact with the carer in order to maintain a relationship with a sibling. Yet, as we see in the following extract, there is no conclusion to this disjunctive story and Marlene has been left with set of contradictions which challenge any normative idea of justice and which bring in to question the validity and truth of her own experience.

Extract 58 :Marlene, Pars 177-181

“Yeah.... em when a wis (*there*) - a hid tae wash the clothes wan night ...a wis actually left outside until the next morning- the taxi come to pick me and (*her sister*) up for school. The taxi even seen me ...washen ma clothes outside ...”.

Did the placement end after this?

“For me aye”

Did somebody report this?

“No”

How did it end then?

“I don’t know”

Right OK

New Connections/ New Stories

Within this research, participants worked to make sense of contradictory narratives but this was rarely accomplished alone. Participants here gained a sense of themselves in the context of relationships and when participants were isolated in their experiences, they were disempowered and devoiced. The importance of supportive and empowering relationships has been a feature of all themes within this research and particularly so within participant processes of change and of growth. However, I would add a caveat to this optimistic note in that participant texts displayed many examples when the integrity of their own identities were compromised by the demands of their relationships (both past and present).

In completing this analysis however, I end by citing a few more examples which highlight the importance of others in participant sense making. Extract 59 flags up the importance and possibility of the making of new families, and extracts 60 & 61 illustrate the self esteem raising support found in the unfamiliar experience of friendship and vocational relationships. The final extract suggests that some of these trusted relationships have provided the opportunity for participants to recapitulate aspects of missed parenting both in nurturance and limit setting (62)

New Connections/ New Stories (Cont.)

Extract 59: Marlene, Pars. 156-158

“The ‘Home Place’ is ma family. They always will be cos they’ve been there for me....If ave ever got any problems a can go to them n’ they’ll try to sort it out wi’ me - so a would feel better”

Extract 60: Nina, Pars. 109-111

“My best friend is Lee - I total love her to pieces. Look at the little fairy she got me for my birthday.... I was like - pure thanks - she gets me a ‘What a friend is’ card and that - and I’m just like - that is so good because nobody has ever done that for me before”.

Extract 61: Nina, Pars. 64-65

“She (*her tutor*) is just funny and she cares about me - she always makes sure I’m alright. It’s like she’s willing to spend time with me. I like her she’s a wee gem - she’s helped me loads ... [] Aye they’ve done wonders for me - I would never have even thought about doing anything until I got introduced to that course - it’s brilliant!”

Extract 62: Marlene, Pars. 820-824

“ It’s because of (*staff at the home place*) that am doing alright as a person. If it wisnae fir them ad be in jail. Probably goat intae heavier drugs - or steelin[] Ah think if we didnae get pit intae care - a wid a been oan the smack or in jail. (*The staff*) taught me how tae live - yeas dinnae need drugs and alcohol - Ah think that why a dinnae like tae get mingin.....well a did last weekend - but that wis a one off! (Ha ha ha)”.

Trying to Make Sense: Summary Points

- Participants tried to make sense of their identities in the context of incomplete and contradictory past narratives.
- Participants' drew selectively and creatively from impoverished pasts narratives; finding nurturance and love in positive instances within a broader picture of dysfunction.
- Access to past and present stories of the self was often owned and controlled by others.
- Participants were compromised in their efforts to make sense of their identities over time, by their need to maintain damaged but valued relationships in the present.
- Participants were supported in their efforts to construct new stories of the self within positive relationships.

3.8 Reflexive Diary: 'Your Identity/My Identity'

In completing this analysis, I include a final 'Reflexive Diary' extract which emphasises sense-making as a social process. The extract is also suggestive of the ways in which power, authority and the speaking rights associated with particular identities shapes the way the self can be enacted, understood and constructed.

** Reflexive Diary*

During this project I became part of participants' social world. How the researcher and research participants negotiated their identities within the research relationship was an integral part of the research process. This occurred mainly in relation to an awareness that 'my other job' was seeing other young people in a *therapeutic* role. Did participants expect me to come with preconceived notions of their being damaged? - and what of my own views and expectations?

Trauma literature is replete with problems and dysfunction. I was well acquainted with this literature and became immersed in it during the writing of this report. From a discursive perspective, stories about trauma, including established research, do not exist in isolation but are situated within shared meanings. In addition, discourses do not freely circulate, but are shaped by the power or lack of it within certain groups and the individuals who represent them. In drawing on psycho/medical discourses in the writing of this report, I did not underestimate the power of these texts 'to speak through me'. Perhaps even more challenging was the unwritten rule that my role as therapist was excluded from the research situation, although in many ways a one-to-one interview situation echoed that of therapeutic contact. Would one or two helpful comments suddenly transform the meeting into a therapeutic situation? Would it be ethical to withhold my views if it was felt that this would be helpful?

It also seemed that in bringing a narrative awareness to this research and in remaining mindful of the power of language, the idea of a distinct category of 'researcher' which stands out - with any possible therapeutic effects, seemed naive, unquestioned. I have not observed participant identities; rather I have played a collaborative role in the way participant identities' have been enacted and told. As such, this research might be more accurately seen as a constituent part in the evolving identities of both participants and researcher.

SECTION 4: DISCUSSION

4.1 Main Findings

Within this research, all participants were engaged in a process of *'Trying to Find Coherence'*. In so doing, participants had many difficult and disjunctive experiences to negotiate. Participants' early experiences of self were replete with stories of violence, loss and rejection. Many of these experiences were unacknowledged at the time and form a core of contested realities in the present. As participants moved through childhood and adolescence, identities were negotiated in relation to these earlier experiences.

Adolescence brought changes to participant identities. However, the demands of new relationships and a social context bringing greater levels of independence sometimes outstripped changes experienced at the level of the self. Changes that were imposed on participants from within their social context were often rejected. However, participants, who were encouraged to develop, heal and grow at their own pace, within the context of ongoing trusted relationships, felt freer to enter and explore independence and growth. When positive change was felt, participants wished to teach and protect others and to pass on something positive from their experiences.

Adolescence was a time when participants tried to find answers to difficult questions and worked towards finding coherence amongst several disjunctive and incomplete stories of the self. However, the power to access these stories did not reside solely with the individual. Necessary information concerning the self was often owned and withheld by others within participant relationships, or within the broader systemic structures and professional groups involved in participants' welfare. Sometimes participants contested versions of their past narratives but more often the finding of answers to difficult questions was negated by the participants need to protect damaged relationships.

Participants, whose past narratives were impoverished, disjunctive, and damaged, also drew selectively from the past in their constructions of self and drew strength from positive instances in which they had felt loved and special. However, drawing selectively from the past entailed an acceptance of contradictions that compromised the integration of the self as a whole.

4.1.1 A Perspective on Findings

According to Parker (2005) the aim of qualitative research is not to give a series of finite results but to offer an analysis which focuses on the ways in which meaningful qualities of human experience such as 'subjectivity' and the 'self' are represented. In so doing, different perspectives can be brought into being and further questions opened up to enquiry. Such a perspective brings an awareness that the accounts people give do not necessarily correspond to what they think or feel and that the 'self' is something performed, either explicitly or implicitly, within the context of particular social settings and relationships.

Such a perspective does not negate research. Instead, social constructionist awareness is brought to the reporting of the self and the limits and scope of the research recognised and reflexively interrogated. Within this research, the key social situation was the research interview and the various meetings which surrounded these events. The relationships which influenced the ways in which the self was told, consisted of all past and present relationships to which the participants refer and perhaps some which remained implicit, together with the relationship between the participants and researcher.

In keeping with these considerations and in reference to the literature discussed within the introduction, this present section now offers a broader discussion of the research findings. While the previous section of this study (the analysis) aimed to stay close to participant text, this section departs to some extent from that position and discusses some of the implications suggested by participant text. This present section also draws more fully from some of the ideographic features within participant texts.

4.2 Relational Trauma/ Damaged Selves

Developmental research offering a neuropsychological perspective emphasises the enduring effects of relational trauma (i.e. Schore, 2001). Long term damage, impairment and vulnerability are also something emphasised within psychoanalytic and attachment-based accounts (i.e. Fonagy *et al.*, 2004; Gleiser, 2003; Kalsched, 1996). Within these accounts, it is predominantly proposed that negative early experiences are repeated within later relationships, that rigid and maladaptive defences negate any further growth and that the ability to reflect on inner and interpersonal processes is compromised and enacted at a less complex level.

The findings within this research do not contest these developmental accounts, but emphasise that those who report the severest of early traumatic experiences can still go on to construct a viable, reasonably hopeful and self reflective sense of self in adolescence. This research also suggests that if reflective function develops as a later capacity, from very meagre early resources, it is facilitated within supportive relationships where difficult experiences can be talked about and reflected upon.

4.2.1 Considering Reflective Function

Some participants seemed to adopt a particularly reflective stance on themselves and their experiences. This was suggested in their use of language and their willingness to spend time and effort thinking about difficult issues. Notably, those who were able to talk about their experiences and thus form some kind of narrative, even if these were incomplete and disjunctive, were those who also reported feeling reasonably content about themselves, their relationships, and their futures. By contrast, where there were impoverished descriptions of self and relationships, a great deal of discontent was expressed.

These observations would seem to add support to Fonagy *et al.* (2004) who propose that the development of reflective function (RF) is an aid to the development of self and the understanding of self and others within relationships. However, RF is usually emphasised as something which develops in infancy and early childhood,

within the context of adequate care giving relationships. This would have been unlikely for some of the participants within this research, whose abusive early relationships suggest the experience of highly dysfunctional early attachments.

It may be important to pause here and consider a further element within participants' lives. Those participants who seemed to express a reasonably positive sense of themselves and who also seemed to be involved in an ongoing process of change (Marlene and Sean for example) were also the participants who reported a good level of social support and an ongoing opportunity to share their experiences and concerns with others. In Sean's case this was provided by a therapist from a specialist service, and in Marlene's case from within a selection of trusted friends and professional relationships. The one participant who was particularly impoverished as to social resources (Teen) was also the participant who seemed the least satisfied with her life and sense of self.

It would be tempting, in having knowledge of Teen's adverse early experiences, to take an early developmental perspective on the genesis of her present problems without also considering the salience of her present social situation. It seems likely that Teen probably experienced some very disruptive early attachment relationships in addition to her experiences of abuse. However, within her present social situation, Teen had no opportunities to share any of her concerns, except perhaps within the limited format of this research. Participant relationships and their present social situation may therefore have played an essential and perhaps underestimated role in whether they were able to reflect on their experiences, form some kind of narrative and so construct a positive, viable and/or manageable sense of self. These processes can be seen as consistent with the building of reflective function (Fonagy *et al.* 2004).

It might be useful here to compare the experiences of two participants who had several areas of commonality within their experiences. As told within their accounts, the early experiences of both Teen and Marlene were largely devoid of nurturing, listening and supportive relationships.

They both experienced severe abuse and they also shared the experience of having a succession of multiple caregivers. Both finally moved to the same residential home; Teen in late childhood, Marlene in early adolescence. Where Marlene's experience differs from Teen, is that somehow she has been able to make use of the therapeutic and supportive relationships she found there. This is something that has allowed her to talk about her experiences in her own time. Perhaps Marlene, in being able to take advantage of therapeutic support during early to mid adolescence, has developed an enhanced capacity to reflect on her experiences and self within these supportive relationships and thus build 'reflective function'. Teen however, has not been able to access (or gain from) this level of this therapeutic support and therefore may not have had the opportunity to build her reflective capacities.

Before we leave the subject of RF however, we need also to consider why a participant such as Teen was not able to utilise what support was offered to her, while others such as Marlene did. It may be that certain crucial factors within Teen's development were particularly hostile to the development of RF and that this is one of the reasons why her sense of self now appears particularly fragile. Teen's first two years spent in hospital may be an important factor. More than any other participant, Teen may have been denied the necessary early interactions which bring an early development of self within attachment relationships. By contrast, a participant such as Marlene may have experienced more interactions with caregivers, even if these were hostile or unpredictable.

4.3 Identity Ascriptions and ADHD

A further implication arising from Teen's account is that, in trying to construct a viable sense of self, she has had the extra work of negotiating her identity in relation to an early diagnosis of Attention Deficit Hyperactivity Disorder (ADHD). After her return from hospital, Teen was deemed 'unmanageable' by her parents and soon after received the diagnosis of ADHD. In trying to understand and make sense of her past and present experience, Teen has the additional burden of trying to construct a viable sense of a self in the context of a diagnosis which is associated with malfunction.

It might also be added that Teen's behaviour can be understood and explained without recourse to ADHD. Teen's experiences, her seemingly chaotic behaviour and her inability to self-regulate affect, other than through strategies such as self-harm, are consistent with those of traumatisation. In considering Teen's story and the problems she has encountered from her perspective, what seems to have been particularly notable is a failure in supportive and nurturing relationships.

Teen's account of her ADHD diagnosis and the influence this has had on her sense of self has constituted only a very small part of this research. However, what her narrative suggests is that Teen's own view and perception concerning the genesis and maintenance of her problems has not been considered. Indeed, it seems that Teen's behavioural problems have been treated without also considering the broader context of her life and sense of self. Perhaps what Teen's account evokes most powerfully, is that in the effort to treat and help her, only professional voices have been heard. There has been a notable *absence* of the client's perspective and voice.

4.4 Integration and the Self across Time

It seems evident that all participants within this study were involved in trying to find a greater sense of coherence within their identities. In an Eriksonian sense, (Erikson, 1997) this would involve the integration of childhood experiences, together with other future-orientated aspirations into the self. Participants often tried to tell a story that made sense over time. However, these stories were only ever partial and unfinished.

It would be tempting to draw from this observation, that a lack of integration was expected in those who had experienced trauma. However, this would seem to disregard a predominant idea within social constructionist and post-modern thought: this being the idea that all of our identities can be considered 'multiple, 'fragmented' and 'incoherent' (see Burr, 2003, p 141). It might also be said, that adolescence (within a contemporary social and cultural context) is now a far more fluid and indeterminate period of transition than that envisioned by founding theorists such as Erikson, (1997) (See Shulman, 2006; Shulman & Ben Artzi, 2003). This in turn

might suggest that a lack of integration within the identities of the adolescents within this research might be expected and may indeed be normative. Perhaps what this study suggests instead, is that the *search* for coherence may be as important as finding it. This idea may again tie in with reflective function. In trying to make sense of their identities, participant's past relationships and inner worlds were opened for consideration, renegotiation and further reflection.

4.4.1 Truth/Lies and Creativity

In attending to matters of coherence, participants negotiated many conflicting and unfinished past narratives. Yet participants also needed to form a story of the self that was viable. That is, they needed to create a self of some worth and value. This involved participants in one of the many contradictions seen within this research: the dilemma of how to attend to a limited truth as 'known', when this 'truth' positioned participant identities as worthless and unwanted.

Sometimes participants told stories that seemed to speak from several conflicting narratives. For example, where there was evidence of a situation or of relationships which might change the colour of a protective or nurturing story, the story still seemed to survive untouched and unchanged. Perhaps we have a picture here of particular aspects of the self that are strongly defended but unable to grow, an idea that may find some confluence with psychoanalytic accounts such as Kalsched (1996).

From a clinical perspective, the presence of these disparate, segregated stories can be seen as evidence of dissociation. If a dialogical perspective is also brought to these stories, different aspects of the self are seen to be lacking in communication with one another (Dimaggio & Hermans, 2004; Lysacker, 2001). When aspects of the self communicate, they are said to 'interanimate' each other, so bringing a greater self-awareness (Bachtin, 1981; Lysacker, 2001). By contrast, many of the self narratives demonstrated within this study support research which suggests that unresolved trauma affects both narrative coherence and self-awareness (Stovall-McClough *et al.*, 2006; Wigren, 1994).

However, we need also to ask what purpose participants' incoherent, dissociated stories might be serving. Perhaps in a tension between coherence and self-protection, participants chose the latter. If so, ironically, this flexible attitude towards truth and identity finds some confluence with the Ericksonian idea of 'selectively' integrating aspects of past selves within present identities (see McAdams, 1993). This is not to deny that in choosing to focus on these positive instances, participants may have also incurred some costs: namely integration. However, within the limited options available to participants at that moment in time, it may be that they were constructing a viable sense of self both pragmatically and creatively.

4.4.2 Veracity

Ascertaining some sense of veracity within contested past narratives was important, however, and professionals as well as past carers had an important part to play in this. Documented information contained, for example, in social work reports might hold important information about participant histories. Access to these documents is greater than it used to be. However, power still resides with professional bodies as to access and information can be withheld, for example, if it is deemed to be potentially damaging. However, accounts such as Marlene's would suggest that we also need to consider the potentially damaging effects of withholding information that is fundamental to how service users make sense of their identities .

4.5 Considering Dissociation

There were many occasions within participant texts which suggested processes of dissociation. These processes seemed to correspond to those described in both the research and clinical literature and comprised both the 'segregated/compartmentalised' type (as suggested in conflicted and contradictory narratives) and those orientating to processes of 'blanking' or 'spacing out'. These patterns conform to some of the known and expected characteristics of traumatisation. However, in considering these processes from a dialogical

perspective, a relational and dynamic process is emphasised. This perspective shifts the idea of dissociation from an individual response to aversive stimuli, into something which carries the traces of past relationships or as something produced within present shared experience. It is a perspective which also questions the locus of dissociation. Dissociation is usually considered as something occurring within the individual. However, there were many instances within participant text which spoke of dissociation as a process occurring between people and as such also a process imbued with power and speaking rights.

It may be important to pause here, to consider the importance of power and how it is intrinsic to the freedom or constraints with which individuals are able to structure the self (Hermans, 2004). From a dialogical perspective, asymmetries and relative dominance are part of any interaction or dialogic exchange, whether within the bounds of the physical self, or as the self is enacted within social relationships. Nina's text for example, suggests that narratives that might bring a fuller understanding of the self and the self in relationships to light may be shut down by those who hold the information and power: i.e. this being her father and his partner. Marlene's story also suggests similar limits to the construction of the self. In this case, the power to access knowledge concerning her troubled history seems to be owned by others within powerful institutions. These instances of 'blanking' of participants' voices and stories by others, who shut down/cut off or blank their own and others awareness, limits the options open to participants and defines which stories can be told and produced within particular situations and which voices can be brought forth and made intelligible.

4.6 Notes on Separation / Individuation

Fonagy *et al.* (2004) have suggested that processes of 'separation-individuation' are fundamental to adolescent well-being and mental health. Within this study, some participants seem to have been thrust into an independence they were ill-equipped to manage. Some participants also seemed to be tied to damaging object ties, in order to receive some limited connectedness (Nina) or to remain close to the source of unanswered questions (Teen). These different scenarios suggest that a variety of

separation/individuating processes might be at play.

Separation/individuation theories propose as an ideal, a renegotiation of relatedness (Kroger, 2004). However, separating from abusive caregivers may involve different kinds of strategies. Based on the accounts within this study, adolescents may need to contest the caregiver version of reality, thereby risking or entailing the loss of the relationship. This might be particularly difficult for the adolescents discussed here, since as we have seen, within damaged relationships, they are habitually positioned so as to compromise their voice and sense of self. The costs to those who do not manage this transition may be even more daunting, with young people tied into disempowering relationships in which the chance to develop a more viable self is denied or inhibited. Separating/individuating may therefore entail more difficulties and costs to adolescents who have experienced trauma, compared to those involved in more normative relationships.

4.6.1 Further Thoughts on Growth and Change

Of further note here is that those participants who seemed to manage the adolescent transition best were again those who enjoyed supportive relationships in the present. This is an aspect of the research which might have been drawn out much more in the analysis, but which, due to present constraints, was noted as an area of fruitful further enquiry (perhaps using the present data in a further process of analysis).

Marlene's lengthy and detailed text was particularly suggestive of how growth away from damaging object ties could be achieved, although one would want to be careful in suggesting that her experience would therefore represent a generalisable pattern. What this research seems to suggest instead, is that achievements of growth, individuation and greater independence, together with a motivation towards relational intimacy, may draw on a host of idiosyncratic factors and the utilisation of local and transient opportunities.

As suggested by Marlene's text, these processes might involve a creative negotiation of past and present relationships and an attitude towards veracity (as to past narratives) which is somehow both flexible enough to absorb a host of contradictions but which also aims towards a greater sense of coherence.

4.6.2 Generativity and Growth

There may be interesting areas of confluence in participants' positive experience of change and theories positing adolescent generativity (Lawford *et al.* 2005) and post-traumatic growth (Tedeschi & Calhoun, 1995). At least three participants here showed aspects of growth and generativity and texts such as Marlene's and Nina's would provide rich material for an analysis based around both precepts. It is important to stress here however, that these participants have not been highlighted because they were 'a success story' or that they were 'survivors'. Rather, these participants had clearly experienced some aspects of growth. They also seemed to aim for a greater sense of coherence while continuing to experience areas of distress. Interestingly, even Teen, who was clearly the most distressed of all participants here, seemed to hold within herself ideas of how she might achieve greater growth and perhaps healing.

4.7 Reflecting on Methodology, Analysis and Ethics

4.7.1 Method

IPA was a pragmatic choice for this study. It has allowed a consideration of a small number of participants' accounts in some depth and has encouraged an open, exploration of subjective experience. However, IPA also entailed some limitations, a view given additional weight due the early consideration of other qualitative methods.

4.7.2 Epistemological Reflexivity

Identity is usually a concept applied to personhood. However, this study can also be considered as having an 'identity'; an identity that has been constructed gradually over time, by the researcher in conjunction with many others. Moreover, although this study utilised IPA as its method of choice, this study did not begin with one

method in mind and could well have developed in other directions; producing a different kind of research identity. Other methods were considered for this study early in its development; namely, Grounded Theory and Discourse Analysis. Thinking about these unused methods and imagining '*what might have been*' has brought forth a number of alternative perspectives to this present study. This has set up a number of tensions, since the different kinds of knowledge that might have been brought forth, have highlighted the limits and points of frustration in the use of IPA.

4.7.3 Limitations in the use of IPA

A criticism that has been brought to IPA is that it takes a naive view of language, that is, IPA tends to treat language as though it were a purely descriptive entity rather than a performative process which actively constructs objects, subjects and persons (see Willig, 2001). Against this, Smith (1995) has proposed that IPA is a method which maintains sensitivity to language and context and which can incorporate both a social cognition and discursive view of persons. Yet in conducting this study, it has seemed that the techniques and conventions of IPA have tended to marginalise language as an issue and have emphasised the individual at the cost of social context. It has also seemed that IPA positioned the researcher as someone required to uncover and bring forth participant experiences (a descriptive venture), as opposed to someone who is involved in the joint construction of meaning. Adopting the latter perspective, would have brought the role of the researcher into much sharper focus and might also have emphasised the participant within their particular social and discursive context.

Several examples might be drawn from this research to illustrate these points. One notable area of concern centred on the reporting conventions of IPA which minimised the reporting of researcher interactions. This seemed to encourage the notion that the researcher was not involved in the process and that moreover, these stories simply existed in the world and would have been told similarly in many other social situations.

Perhaps also, the reporting of participant texts as largely individual narratives situates the participant as someone out with the relationships and the social world in which they are situated. As such, IPA reporting conventions may feed a grander story concerning individual responsibility.

4.7.4 Analyses

There were moments during this research where the scale of an IPA analysis seemed out of keeping with the text under consideration. There was also a feeling that the large amount of data produced by this study, compromised detail. In respect of the first point, it seemed that a line by line analysis was sometimes called for. Although this was attempted at certain points within this analysis, IPA seemed to lend to a broader analysis of meaning. There are of course always compromises in the choice of method, and overall, the analysis was probably compromised more by having too much text to consider in detail, rather than the actual method used. Interestingly, I felt myself very drawn to each individual text and the rich data promised there, yet compromised by the demands to find an overall analysis. Indeed, it may be that a different kind of IPA analysis, which focussed on a closer idiographic reading of individual texts, would be a useful area of enquiry in its own right. I would also add that if the analytic scale of IPA sometimes seemed too broad, it also seemed to encourage an open exploratory focus. Overall, IPA allowed an ease in approaching participant subjectivity and an attention to broader swathes of meaning, from which, further points of enquiry might arise.

4.7.5 Ethical Considerations

One issue that was raised for me in this research concerns the interviewing of vulnerable participants and centres on the issue of where research ends and therapy begins. This matter also involves the question of why participants came to this research and what use they were making of it. It also concerns my own intentions as researcher. I would like to think that participants were able to use the research process to learn more about themselves. However, this objective can also be considered as a therapeutic endeavour. This issue becomes far more complex when we consider that the making and finding of narratives of the self can be considered as

a therapeutic activity in itself. Indeed, various therapeutic approaches are either explicitly or implicitly based around this idea (see Holmes, 2001, White & Epston, 1990).

Moreover, if there were additional therapeutic aspects to this research, we must question the ethics of entering someone's life on that level and then departing. These ethical considerations seemed particularly pertinent in relation to Teen, who seemed to be devoid of social support and who had no other means, at her present disposal, of exploring issues of concern. A further aspect to this is that there was a lack of appropriate services available to serve Teen's needs. Teen was over the age limit for the 'Specialist Team' and although a referral to adult services was possible, waiting times were prohibitive. It may be also, that Teen's diffuse and complex problems would necessitate lengthy treatment, something that hard-pressed services might find hard to accommodate. Although Teen was referred to a Counselling service during this research, Teen's participation in this study has exposed a gap in service delivery.

4.8 Research Weaknesses

One of the most challenging aspects of this research is that it has considered trauma in relation to an elusive construct: this being 'the self'. This research has managed this problem by appealing to notions of participant 'subjectivity'. As this study has unfolded, the weakness of this starting position has become increasingly apparent. Ideas of what the self might be and how it might be told, is something co - constructed between participant and researcher. As such, it involves the researcher's own views, ideological position and subjectivity as well as those of the participant. This was a particularly pressing point in a study considering '*traumatised*' selves, where the negotiation of 'psychologist/researcher' and 'victim/survivor' identities came strongly into play. How to acknowledge these paradoxes and dilemmas while honouring participants' experience has been a tension within this research which has remained unresolved.

sThese weaknesses have however, offered some clues which might inform further enquiries. This study selected various theoretical approaches which seemed to inform the subject of the self (notably dialogical theory) yet also maintained an open and enquiring stance. Certainly, if I was to approach 'the self' within further research, I would begin from a particular theoretical perspective and would also choose a set of more discrete research objectives. In this matter, I would not wish to negate open enquiry, but instead, to shift the emphasis. I would add here that acknowledging the difficulties in approaching 'the self', problematises an issue of definition which is little questioned within research.

4.8.1 A Gendered Analysis?

One seemingly marginalised area of this research is the voice of male participants. The reader may have noted fewer male extracts within the analysis and fewer references to these participants within the discussion. Certainly, this was not an intentional omission: and several different reasons might partly explain this. Firstly, having just two male participants, who both gave fairly short, pragmatic accounts, gave rise to texts which were not as rich in detail compared to their female counterparts. This might not have been a problem given larger participant numbers. However, two male participants was probably an inadequate number for the concerns of this present research. Moreover, IPA tends to emphasise the importance of homogeneity within the participants. Within the bounds of this present study, it might have better to have had a slightly larger number of participants consisting of one gender only.

It may also have been that in conducting interviews with females first I set myself in a particular direction as to style of interviewing. This may not have been appropriate for slightly younger males. However, a suspicion remains that my own gender played a role in emphasising the female voice over males. I offer no further analysis on this point, other than to note that there are reasons to suppose that the visibility of males might be marginalised in issues of abuse, both in terms prevalence and within a dominant cultural understanding. Perhaps my omission has in its own way reflected a prejudice we would do well to note.

4.8.2 A Focus on the 'Strong One'?

If this study has orientated towards the female participants, it might also be faulted in orientating towards Marlene. Marlene spent twice the interview time of any other participant. She was also very engaged in the research as a whole and seemed to emerge as the 'strong one'. Two points arise from these considerations. The first comes from Pearlman & Saakvitne (1995) who warn against orientating towards strength as a means of defending against pain. The second is that Marlene's generative stories were demonstrated at a particular point in time, within a particular social situation. Marlene might have presented differently on another occasion. Moreover, it would be wrong to characterise Marlene as a prototypical 'survivor'. Marlene, in common with the other participants here, told stories that were far more complex and contradictory than a simple characterisation as victim or survivor would allow.

4.9 Implications for Research & Practice

4.9.1 Further Research

It can be argued that focussing on the 'strengths' within participant accounts can limit the way we think about trauma and the self. However, stories of interpersonal trauma which focus on 'damage', 'difference' and 'enduring' difficulties also constrain the way both professionals and clients think about the effects of interpersonal trauma and therefore the kind of selves that are possible. Following on from these concerns, perhaps a fruitful direction to pursue would be to consider the present client group within the paradigms of 'post-traumatic growth' and 'generativity'. What both of these perspectives share is the idea that past experiences (both positive and negative) can be drawn on and utilised in the development and evolution of the self.

A further research direction suggested by this study would be to focus more on the interaction of gender and selfhood in the context of earlier interpersonal trauma. During this present study, the small number of participants negated this kind of enquiry, although identity issues relating to gender and sexuality were often evoked by participants.

Finally, it might be fruitful to utilise narrative methodological approaches within this area of enquiry (see Murray, 2003). Such an approach might aim to look at patterns within the life narratives of a fairly large amount of participants and to say something about the direction, turning points and moments of change within their life stories. In so doing, key influences (both protective and damaging) might be identified, and pathways towards the development of both psychosocial problems, and routes towards growth and recovery identified. A related approach would be to focus on *how* these stories are told. This emphasis would attend far more closely to the discourse properties of client narratives. Such research would therefore tie in far more closely with ideas of narrative coherence found within some contemporary attachment perspectives (see Stovall –McClough *et al.* 2006).

4.9.2 Implications for Practice

Bringing a dialogical perspective to this research has emphasised the importance of narrative in the construction of a viable sense of self. Holmes (2001, p87) has described a fundamental feature of therapy as the ‘dialectic between story-making and story breaking’. This emphasis would seem to be particularly advisable for service-users whose histories and relationships are disjunctive and impoverished and whose problems are often diffuse and complex. Bringing a dialogical perspective also brings awareness to the idea that there may not be only one story of the self; many indeterminate stories/voices might be potentiated, although some of these may be marginalised or lost to present consciousness. In considering the client group which has provided the focus of this study, it may be that one of the chief roles of therapy, is to create a facilitative social context where the germs of more generative narratives can be brought forth and developed.

A further emphasis brought by a dialogical perspective and also something which emerged strongly within participant accounts, is the notion of the self considered as a relational process. It can be argued that Clinical Psychology, in common with other allied services and institutions, maintains a chiefly individualising stance as to its clients. Such a perspective may attend to individual needs but can also tend towards the individualisation of problems. It also tends to place responsibility within an individual locus, instead of something shared, made, and perhaps solved within many interweaving relationships. Stories told about the self are not equally accessed, nor are they accorded equal authority or rights to veracity. It seems to me that one of the most important implications of this study is that a fragmentation of the self can be maintained and indeed produced within relationships (both professional and private) in which power is unreflectively accepted.

4.10 Concluding Thoughts

This study has aimed to explore the self in adolescents who have experienced early trauma. These selves have often presented as fractured; as something told within incoherent or impoverished narratives and as something compromised by the need to maintain damaged relationships. However, in considering these texts from a relational and narrative perspective, incoherence can be seen as something constructed between people, with unknown aspects of the self sometimes owned and controlled by others.

Perhaps professionals who have power to define some of the stories of the self, need to shift more of this power towards the clients themselves. This does not mean that clients need only be encouraged to tell their stories, since clients may be beginning from an impoverished and disjunctive speaking position. Clients need support to *find* and *create* their stories and thus their identities within a therapeutic framework which admits the impossibility of finite coherence and veracity but which nevertheless aims for it, towards a greater understanding and making of the self.

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APPENDICES

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Appendix (I) Ethical Approval

[REDACTED]

16 January 2006

Ms Sheila Hynd
Trainee Clinical Psychologist

[REDACTED]

Dear Ms Hynd

Full title of study: Constructing Adolescent Identities In the Context of Trauma
REC reference number: 05/S0501/120

Thank you for your letter of 27 December 2005, responding to the Committee's request for further information on the above research and submitting revised documentation. The further information was considered at the meeting of the Committee held on 10 January 2006. A list of the members who were present at the meeting is attached.

Confirmation of ethical opinion

On behalf of the Committee, I am pleased to confirm a favourable ethical opinion for the above research on the basis described in the application form, protocol and supporting documentation as revised.

Ethical review of research sites

The favourable opinion applies to the research sites listed on the attached form.

Conditions of approval

The favourable opinion is given provided that you comply with the conditions set out in the attached document. You are advised to study the conditions carefully.

[REDACTED]

Ms Sheilagh Hynd

[REDACTED]

[REDACTED]

11th April 2006

[REDACTED]

Dear Ms Hynd

Project Title: "Constructing Adolescent Identities in the Context of Trauma"

Thank you for your application to carry out the above project.

Your project documentation has been reviewed for resource and financial implications for [REDACTED] Primary Care Division and I am happy to inform you that Management Approval has been granted, subject to all necessary Ethical approvals being in place.

Details of our participation in this study will be included in quarterly returns to the National Research Register and annual returns we are expected to complete as part of our agreement with the Chief Scientist Office. The enclosed Research Registration Form has been prepared and should be checked, signed and returned (in the enclosed SAE) to the R&D Office [REDACTED]

May I take this opportunity to remind you that all research undertaken [REDACTED] is managed strictly in accordance with the Research Governance Framework (RGF) and should be carried out according to Good Clinical Practice (GCP). In order to comply with the RGF, the R&D Office are required to hold copies of all study protocols, ethical approvals and amendments for the duration of this study.

You will also be required to provide information in regard to monitoring and study outcomes, including a lay summary on completion of the research. I would like to wish you every success with your study and look forward to receiving a summary of the findings for dissemination once the project is complete.

Yours sincerely

[REDACTED]

[REDACTED]

Medical Director

[REDACTED]



PARTICIPANT INFORMATION SHEET

REC ref no. 05/S0501/120

The Research Project

INVITATION: We are asking you to take part in a research project so that we can look into the following question: How do young people who have had difficult experiences feel about themselves as people; and how do they get on in their relationships. Before you decide if you want to join in, it's important to understand why the research is being done and what it will involve. So please read this leaflet carefully. Talk about it with family, friends, doctor or nurse if you want to.

Thank you for reading this. Please read on.

WHY ARE WE DOING THIS RESEARCH?

This research looks at the personal experience of young people who have had some difficult experiences in the past. These experiences might have involved abuse or the experience of violence. This research is interested in finding out how these young people work towards a sense of self (or identity) despite having experienced these difficulties; and how they manage in relationships.

WHY HAVE I BEEN ASKED TO TAKE PART?

You have been asked to take part because you are a young person who has had some difficult experiences. We think that you might be able to tell us something very important about how you feel about yourself as a person. Other young people who have had some difficult experiences will also be invited to take part in this research

DO I HAVE TO TAKE PART?

No. It's up to you. If you do decide to take part you will be given a consent form to sign. You will also be given a copy of this information sheet and your signed consent form to keep. It's important to keep in mind that you are free to stop taking part at any time during this research without giving a reason. If you decide to stop, this will not affect any care you might be having at the present time.

WHAT WILL HAPPEN TO ME IF I TAKE PART?

You will be asked to meet with the researcher at a convenient place. The interview should take about 1½ hrs and tape recorded. The interview will take place at either a local voluntary agency; at a local GP surgery; at your school; or at an NHS clinic. There is also the option of interviewing you in your home. Your local travel expenses will be paid. There is an option of extending the interview over two sessions if you prefer. You will be offered rest breaks and refreshments. The interview you give will be completely confidential, and all names and identifying information will be changed.

WHAT WILL I BE ASKED TO DO?

The researcher will interview you in a quiet room. The interview will be 'in depth': that is, I will be interested in the events and persons in your life that have contributed to your sense of self as a person. Although I will be covering certain topics, I will not have a fixed set of questions, and you will be free to explore issues and express yourself as you like.

It may be that after the interview itself you might want to talk out some of the issues with the researcher a little more. If so, the researcher will arrange a time soon after the interview to cover these issues. If by any chance the interview raises issues that you need to talk about at greater depth, the researcher will suggest or arrange suitable counselling.

WHAT HAPPENS WHEN THE RESEARCH PROJECT STOPS?

I will send you a brief version of the research after it is complete (this will take a few months, and you can expect to receive something in October, 2006). If you would like a copy of the entire research I will send you a full copy also. I will also make a presentation of the research at the premises of voluntary agencies who have contributed to this research, and you will be invited.

WHAT IF THERE IS A PROBLEM OR SOMETHING GOES WRONG?

If you agree to taking part in this research, the researcher will keep in contact with you regarding any ongoing arrangements for interview. You will be kept informed of any other problems that might arise that might affect you.

WILL ANYONE ELSE KNOW I'M DOING THIS?

Yes. My supervisor at my place of work and at University will know. Also the therapist or therapeutic worker who you have been working with, and who put your name forward as a possible participant will know. These people will treat this information as strictly confidential, and your name and the nature of your participation in this research will not be disclosed out with these bounds. If the research is to take part at your school; your guidance teacher (or similar) will be given some limited information concerning the fact that you are taking part in a research project. You should be assured that all information that is collected about you during the course of this research will be kept strictly confidential. All written information concerning you be kept in a locked file drawer at Lynebank hospital. When the results of this research are written up all names and identifying material will have been removed.

WHAT ARE THE POSSIBLE BENEFITS OF TAKING PART?

We cannot promise the study will help you personally, but the information we get might help other young people who have experienced the same sorts of problems and who are facing the same challenges as yourself. Your personal experience is a very valuable source of information that could help inform the way professionals think about supporting young people. It is also possible that in exploring the issues within this research you yourself gain greater knowledge and insight as to your sense of self.

CONTACT DETAILS

Sheilagh Hynd, *Trainee Clinical Psychologist*

The Centre for the Mind and the Child



WHO IS ORGANISING AND FUNDING THIS RESEARCH?

I am a trainee clinical Psychologist based at the University of Edinburgh. As part of my training, I work at in the NHS as a psychologist and I am doing this research as part of my qualifications. I will be doing this research alone, but I am supervised by a Clinical Psychologist at the University of Edinburgh and by another Clinical Psychologist who works in the NHS. This research isn't funded as it is an educational project.

WHO HAS REVIEWED THIS STUDY?

This research is supervised by psychologists who have experience in research, and who also specialise in working with young people in your age group who have experienced similar problems to you. It has also been reviewed by the Fife and Forth Valley Ethics committee.

Consent form regarding the following research:-

**The Interpersonal Construction of Self in
Adolescents who have Experienced Trauma**

	CONSENT FORM	Please Initial box
1.	I confirm that I have read and understood the information sheet dated ———, for the above study.	
2.	I have had the opportunity to ask questions and have had these answered to my satisfaction.	
3.	I understand that I can withdraw from this research at any time	
4.	I consent to take part in this research	

NAME OF PARTICIPANT _____

SIGNATURE _____

DATE _____

NAME OF RESEARCHER _____

SIGNATURE _____

DATE _____

Appendix (III) Interview Schedule

Participants have been asked to bring along/or think about 3 objects that are important to them to use as to spark conversation/memories if they wish

Objects: What they mean to you, the people involved, say about you?

Current Situation/Relationships

- Live, work?
- People in your life at the moment?

Bad Times/Good times

- What for you have been the bad times/good times?
- People around then?
- People who made things better/worse?
- Difficult/good experiences affected way you think about yourself?

Early Experiences

- Family –who they were-how they were
- Memories of mother/father/carer (s) Good times? Bad times?

As you grew older (changes over time?)

- Changes as you grew up a bit?
- People around at those times?
- Who has been important to you?
- Close to?
- Made you feel better /worse about yourself?
- Turning points?

Relationships Now

- Important people/intimate relationships?
- Different people bring out different aspects of you?
- Problems/arguments happen –what are they about?
- How do arguments/problems make you feel?
- How react/what do you do?
- Free to be yourself?
- Share your deepest thoughts with?
- Talk about the difficult times? (past & present)

Close Relationships

(experience of - or projected part of future)

- How got together?
- a good/bad memory
- How you see each other
- Relationship make you feel about your self?
- Be yourself?
- Conflicts/arguments
- *what are they about?*
- *how make you feel*
- *what do you do?*
- Talk about/share problems?
- Share difficult experiences?

The whole story

- How you see yourself now
- The past affected how you see yourself?
- How you see others?
- Anything that can make you feel better/worse about yourself?
- What has made you who you are today?
 - *the person you were ...*
 - *the person you are ...*
 - *the person you would like to be ..*
- Feel you have changed?
- Would you like to change?

Appendix (IV) Extracts: Raw Data/ Analysis
(Example: First Stage Analysis)

Extract 1 Notes		Themes --
	you going into care?	
Hard to say...	Ma mum.....wasn't looking after us properly	TECHNICAL
	Right	
Hard to say...	and.. (mumbles) sexual abused n' that	A LITTLE
	From within your family?	
	Yeah...	
	Right Was that from your dad or ?	
Not for mum	Ma mum	
	Hmm.....	
	Do you think it was as worse being from your	
	Mum or .. ?	
disput in in shy - sister pup Mum & brother	And eh ma foster parents brother in law and ma foster eh brother	CONTINUING STORIES OF ABUSE
	That a lot	
	Mum, foster uncle an' foster brother	
	In the same foster family Was that the first foster home you went to?	
	Yes.	
	And your mum wasn't looking after you and the sexual abuse, was that to the whole family or just you?	
ISOLATED EDUCATION	Just me a think.ah ah don't know if it happened to anyone just me a think	ALONE ISOLATED
	You are. Are you in contact with your mum?	
Have to reunion relationship with dad to join again	Yes, it's only because ma youngest brother stays with her.	COMPROHENSIVE
	So its just to see your wee brother. How long before you started seeing her again.	
	Eh first time?....well when we first got put got into care we went to visits and that and that stopped a couple of years later.... a think	Relationship INAPPROPRIATE People central SUPPORTLESS AGAIN PROTECTIVE
We contact of a relation - in contact after /	it was 1998. A got in contact wi' her again through ma social worker cos a found out she was pregnant again wi ma brother.	
BUT that again today Really to protect	How did you feel about that?	
	A bit shocked.....cos I always say ma	

REFLECT	mums an idiot. She always will be.	Reaction
unclear	Is that how you feel about her?	
Belonging	Aye. Wan time .. a jist come back frae	Belonging -
trust	holiday... Switzerland on a school trip. A	TRUSTANCE
planned to	got a knife.... in that's how angry I was	ANGER
affairs may	about her	
well	Can you remember what it was when you	
	were younger?	
Memory of	A can remember wan time a wis' jist comin	
belonging -	back frae school. It was a hot summers day,	VIOLENCE
juste just	so we went intae ma grans - had a water	Sudden anger
affairs may	fight that.. A chucked water over ma	
VIOLENCE	Mum. She turned roon and slapped me oan	VIOLENCE
Marked by	the back... There wis a handprint oan ma	mark of ONCE
later	back fir about 3 months.... I was probably	
Violence	about 5	
Violence	Did she hit you other times or is that just the	
once?	once?	
NO HEAVEN	That's the only one a can really remember...	Memory of
Violence	mmm she stuck screw drivers doon our ears	VIOLENCE
	Stuck screw drivers?	Violence
Mum's/beat	Yeahto clean them. Ma wee sister is eh	CARING &
dangerous	a bit deaf... you can hardly hear her properly	VIOLENCE
dangerous	when she speaks just because ma mum	SYMBOLIC
not - can't	stuck the screwdrivers in her ears. She had	BEING
talk to her.	tae get eh surgery in her ears. Her eardrums	
DAVID	were a' burst	
	Can you remember when you were that age	
	feeling any affection towards your mum?	
Again,	The only time a goat affection towards ma	REFLECT
without self-	mum wis a skelp and that wis it. Eh	Violence
only affair	whenever a wis wanted a cuddle n that she	Violence
Violence	would always push me away oos she had	PUSHED AWAY
Reaction		REFLECT
Violence	Your we-eer sister. How about the basic	
	necessities food and stuff. did she look after	

you in that way?		
It wasn't actually her. It was ma dad.		
You were saying he was in a hostel?		
A homeless hostel		
Right but he would come and look after you?		
Yem (Pause)		
Do you think you your experience shave		
affected the way you think about your self.		
now.... over time?		
Over time? Yeah cos I used tae no talk about		
it keep it tae maself just let it a' get built up		
and go intae am room and no dee any thing		
just fa' asleep depressed in that		
Depressed?.. how old would you have been?		
Eh... talking about seven years ago probably		
Can you remember how you felt when you		
were younger -when you went into care and		
that?		
No how a really felt No. I don't think I was		
aware o' it		
So when did you become aware?		
When I wis at the home. I fist went there		
when I was 12		
Is that during the period when you spent a lot		
of time on your own?		
Yeah a use ta dae that quite often. The staff		
used tae walk about the hoose tee see if a		
wis in ma room -a wis always I ma room a		
wouldna come doo an interact wi' the others		
Why do you think that was?		
At the time a think a wis just needen ma		
space.		
You were needing your space		
Aye eve always been quiet. Since -eve		
been tae the home ave never had any		
problems wi' the staff or any o' the kids		

~~DISJUNCTION~~
~~CONTRADICTION~~

~~CONTRADICTION~~

~~DEVOICED~~
~~Depressed~~
~~No warn~~
~~Blank or out~~

~~Beet times~~

~~No awareness~~

~~C.H.A.N.G.E~~

~~SOLITUDE~~
~~Kept him~~
~~for out~~

~~EXPERIENCE~~
~~IS ANYTHING~~
~~IN TIME~~
~~Good time~~
~~Start safe~~
~~PROTECTS~~

Exhat 2

	Something put behind you?	
hmmmmmm	Hmmmm.....a still sometimes get nightmares	LAST
not saying yes	a had wan when ma boyfriend wis in the	Newman
asie to shoe	hoos at the time eh. He woke up and he wis	(Snoed exp)
couldn't ask	like: 'whit's the the matter wi yea?' He	
S'henny	knows everything about ma life. It came out	
	when the nightmare happened ... It's the first	
Phyllis	time in 8 yrs. I had that nightmare	
blue	only get it when I think about what	
Phyllis	happened..... when a remember it	
wasn't	Its like the nightmare a' used to have when	
Sherry	me mum would come in the back door and	
Memory	kill the dog, kill the foster parents and take	
read	me and my wee sister away. Ave no had	
Epiphany	that in maybe 8 yrs.	
reggae part	And the recent one?	
Muske D. My	The recent one was when a wis in Largs it	
Original story	wis ma foster parent. she would make sure	
revised story	that I would wash clothes by hand outside in	
line:	the freezing cold. This ...it actually	
Bravado to	happened. I got accused of doing the toilet	
reader	on the clothes and that	
PC with a dirty	By the foster parent?	
ABOVE ABOVE	Yeah, so I had tae wash them by hand out in	
the freezing cold	the freezing cold but before that she would	
the freezing cold	rub the ice in my face	
Obviously not in touch with that foster parent	Obviously not in touch with that foster parent	
Got tae cos a ma sister	Got tae cos a ma sister	
Tell me about that what age were you	Tell me about that what age were you	
Just before here About 12	Just before here About 12	
It can't have been a particularly	It can't have been a particularly	
happy.... (foster experience)	happy.... (foster experience)	
No...eh there were 13 eh us in the house.	No...eh there were 13 eh us in the house.	
There was me and (mentions children	There was me and (mentions children	
each by name). Two o' them were there own	each by name). Two o' them were there own	

	and the rest foster kids..	
	And it wasn't a happy time..	
Socialisation - escape the day?	For me no. A can remember wan time when ma and Carrie's first foster parents would come up and see us but ma foster parent	ISOLATED HIDDEN AWAY Secret Separate
Trapped Imprisoned denied identity	would lock me in the bedroom a wis nae aloud out cos a was wasn't quite often.	
	So how did you see them?	
	I never	
Socialisation - Separated Dad as Grandma What's the Story here IIIH	They saw ma sister	ISOLATED From things She knew Chosen as BA ONE III/sick-
	Why?	
	She never liked me. She (the foster carer)	
	was always close to Carrie . After a left there	
	a hud tae go tae Yeovil Hospital for 6	
	months...	
	What treated for?	
	Not sure... Think it was psychology ... it was	
Isolated/Stripped Place	the back i the hospital...	ISOLATED HARD PLACE
	So it's funny that you started talking about nightmares then started to talk about your real experience: is that your nightmare.	
	yes.	
	Do you still have it	
	No	
	Its gone	
Hempire Story - reality Washed clean	Yeah.... em when a wis in Largs when a hid tae wash the clothes wan night ...a wis actually left outside until the next morning the taxi come to pick me and Carrie up for school. The taxi even seen me washen ma clothes outside	RE-AL DREAM WASH
	Did the placement end after this?	
	For me aye	
	Did somebody report this?	
	No	DISTURBED JURY

Developing the Analysis
(Pre- NVivo Import)

Summary Statements//Notes	Tony: Extract 1	Developing Themes
	<i>Who would you say are the important people just now?</i>	
Two women	My gran, my aunt and Mrs Renwick.	People Now/ Belonging
	<i>Your gran, your aunt and Mrs Renwick yeh</i>	
	<i>What do they mean to you individually.</i>	
No thoughts	Eh... I dinnae ken.	Not thinking
	<i>How do they make you feel?</i>	
But OK	Awright....	No further thoughts
	<i>Okay... as I say all the young people in this research have had difficult experiences and I know that you've had some in the past.</i>	
Not entering conversation.	Mhh	? Not entering into
	<i>And when you think back to your life what have been the difficult times for you?</i>	
Connects exp. with mum & later probs.	Mmm what my mum done to me eh and just problems at school as well.	Continuing Experiences VIOLENCE
	<i>And problems at school as well yeh, can you describe what your mum did?</i>	
Describes mums aggression/pushed down Change to new carer	Eh she tried to drown me and she pushed me down the stairs as well. She tried to drown you right. And that's how I got put up to gran.	Violence Loss but new carer Finding reasons (joining –making story of)
	Tony Extract 2	
	<i>Right, mm so you moved out your mum's house when you were about one?</i>	
Not entering conversation	Mhh	Blanks me
	<i>And have you had anything to do with her since.</i>	
Distance but some contact	Aye I get contact with her.	Continuing Relationship -but in context of violent past
	<i>Right.</i>	
Brings mum relationship into present	I'm seeing her the night.	The present
	<i>Your seeing her the night okay that's interesting..... When you think back when you were a wee boy what do you remember of her as a person- or your relationship?</i>	
No thought	Eh no much.	Minimal thoughts
	<i>No much, what sort of person do you think she was then.</i>	
Not interested?	I dinnae ken.	Minimal attention
	<i>Do you have an idea of what sort of person she is</i>	

	<i>now that you've grown up a bit.</i>	
Closes down	Nut.	BLANKING conversation?
	<i>No. Do you care what sort of person she is?</i>	
No curiosity?	I dinnae ken....	NOT THINKING
	Tony Extract 3	
	<i>So you had trouble from the teachers?</i>	
Picks out one woman (like mum?)	Mhh, just her - all the rest were alright it was just her.	Continuing experiences (mum & teacher)
	<i>Right just her and do you remember anything else or the way that she was towards you.</i>	
Teacher aggressive	Aye she hit me - in the office as well - she hit me.	Recent VIOLENCE
	<i>Can you describe that how that all was.</i>	
Treated him like baby!	She put me across her lap and hit me.	Humiliation?/VIOLENCE
	<i>How old were you then.</i>	
Recalls time	About 8	Knowledge?
	<i>Mhh and what had happened before that.</i>	
But no more a blank?	I cannae mind.	BLANKING IT
	<i>Right</i>	
Enjoyed retaliation	But every time she time she tane us down the road we would hit and kick her to let us go.	Enjoys VENGEANCE?
	<i>Every time- what?</i>	
Hit out anywhere to get aggressor off.	...Tane us down the road to grans - where we would hit and kick her to get her off us, anywhere we would reach	Vengeance
	<i>Really</i>	
Enjoyed the comeback	And kick her tae.	Vengeance

Appendix (V) Extract N Vivo: Example: Themes/Nodes in Development

NVivo revision 2.0.163 Licensee: Sheilagh Hynd

Project: My Thesis

User: S. Hynd

NODE LISTING

	Nodes in Set:	All Nodes
	Created:	04/04/2006 - 15:58:16
	Modified:	21/10/2006 - 18:36:35
	Number of Nodes:	99
	1	'm only a bairn,
	Description:	
In Vivo node created from NINA NEW CODING		
	2	(1) /AMBIENT VIOLENCE
	3	(1 2) /AMBIENT VIOLENCE/past
	4	(1 2 1) /AMBIENT VIOLENCE/past/continuing
	5	(1 2 2) /AMBIENT VIOLENCE/past/nighmares
	6	(1 2 2 1) /AMBIENT VIOLENCE/past/nighmares/hunting
killing		
	7	(1 3) /AMBIENT VIOLENCE/present~continuing
	8	(1 3 4) /AMBIENT VIOLENCE/present~continuing/in fantasy
	9	(1 3 4 1) /AMBIENT VIOLENCE/present~continuing/in
fantasy/imagining vengeance 'psycho thoughts'		
	10	(1 3 5) /AMBIENT VIOLENCE/present~continuing/shared
	11	(1 3 6) /AMBIENT VIOLENCE/present~continuing/in
nighmares		
	12	(1 3 6 6) /AMBIENT VIOLENCE/present~continuing/in
nighmares/reexpereincing ~in dreams~		
	13	(1 3 6 6 1) /AMBIENT VIOLENCE/present~continuing/in
nighmares/reexpereincing ~in dreams~/hunting, killing, harming		
	14	(1 3 6 6 3) /AMBIENT VIOLENCE/present~continuing/in
nighmares/reexpereincing ~in dreams~/N~B~ Same essence~tranformed		
	15	(2) /REJECTION OF SELF & OTHER
	16	(2 3) /REJECTION OF SELF & OTHER/loss of relatedness
	17	(2 3 1) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced		
	18	(2 3 1 3) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/hidden way		
	19	(2 3 1 4) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated		
	20	(2 3 1 4 1) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/the bad one		
	21	(2 3 1 4 5) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/loss of fun~freedom~youth		
	22	(2 3 1 4 5 1) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/loss of fun~freedom~youth/jelous of youth		
	23	(2 3 1 4 6) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/hidden away~marginalised		
	24	(2 3 1 4 8) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/abandoned by others		
	25	(2 3 1 4 8 2) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/abandoned by others/abandonment		
	26	(2 3 1 4 8 9) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/isolated/abandoned by others/fear of		
	27	(2 3 1 5) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/in the reports		
	28	(2 3 1 6) /REJECTION OF SELF & OTHER/loss of
relatedness/devoiced/obseved not seen		
	29	(2 3 2) /REJECTION OF SELF & OTHER/loss of
relatedness/lost of trust ~		
	30	(2 3 2 1) /REJECTION OF SELF & OTHER/loss of
relatedness/lost of trust ~/trust in interview relaitonshop		
	31	(2 3 2 1 1) /REJECTION OF SELF & OTHER/loss of
relatedness/lost of trust ~/trust in interview relaitonshop/sussing out identites		
	32	(2 3 2 2) /REJECTION OF SELF & OTHER/loss of
relatedness/lost of trust ~/threatened~threatening ~afer some i		

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